

Trigger Finger (Stenosing Tenosynovitis)

PHYSICAL THERAPY PATIENT EDUCATION & MANAGEMENT GUIDE

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Trigger finger, medically known as stenosing tenosynovitis, is a common condition affecting the tendons in your hand that bend your fingers. When inflamed, the tendon struggles to glide smoothly through its protective sheath, leading to catching, locking, or clicking sensations during movement.

Understanding the Anatomy

Flexor tendons pass through a series of annular rings (pulleys) along the palm side of the finger. If the tendon develops a localized nodule or if the A1 pulley thickens, smooth transit becomes restricted, causing the characteristic catching or locking phenomenon.

Common Symptoms & Presentation

Primary Signs

- Morning stiffness and locking in the affected digit.
- A popping or clicking sound when bending or straightening the finger.
- Tenderness or a noticeable small bump (nodule) at the base of the finger on the palm.

Aggravating Factors

- Repetitive gripping or grasping tools.
- Prolonged use of vibrating machinery.
- Activities requiring sustained high pinch force.
- Higher incidence in individuals with diabetes or arthritis.

1. Normal Glide

Tendon moves freely through pulley sheath



2. Inflammation/Nodule

Tendon thickens or develops fluid nodule



3. Catching / Locking

Nodule catches under the tight A1 pulley



Conservative Physical Therapy Approach

Physical therapy focuses on reducing local inflammation, preserving joint mobility, restoring pain-free tendon glide, and modifying daily activities to prevent excessive mechanical irritation.

1. Gentle Range of Motion (ROM)

Active and gentle passive range of motion exercises help prevent joint stiffness without overloading the tendon.

- Perform pain-free full finger extension and flexion.
- Avoid forcing the finger straight if severe locking occurs.

2. Splinting & Rest

Night splinting in a neutral straight position prevents the finger from curling during sleep, reducing morning locking episodes.

- Typically worn for 4 to 6 weeks.
- Minimizes nocturnal friction on the pulley.

3. Tendon Gliding Exercises

Structured gliding sequences promote smooth movement through the tendon sheath:

- Start with a straight hand.
- Move into a hook fist, return to straight.
- Make a full fist, then a tabletop position.

4. Activity Modification

Modifying tasks reduces cumulative microtrauma:

- Use padded grips on tools and steering wheels.
- Take frequent breaks during prolonged gripping activities.
- Avoid heavy resistive gripping during flare-ups.



Medical Disclaimer: This document is prepared strictly for educational and physical therapy informational purposes by PT Ahmad Al Hariri. It does not constitute medical diagnosis, surgical consultation, or pharmacological advice. If symptoms persist, worsen, or involve severe locking and fixed contractures, consult an orthopedic physician or hand surgeon immediately.