

Release of trigger finger

Approximately 15% of my patients with trigger finger will need this surgery. The vast majority of patients respond favourably to a steroid injection. I commonly see 2 or 3 patients a week with this condition.

Consequently I seem to operate on patients about once a month with this condition. Most commonly I perform one trigger finger release at a time but occasionally more than one is required. This operation is usually performed under local anaesthetic as a day case. You can expect to spend a couple of hours in hospital being prepared for the surgery and then in recovery.

The operation is performed in a standard operating theatre. The hand is painted with antiseptic and a tourniquet is applied. This feels like a tight blood pressure cuff and is on for the duration of the operation. I always make sure that the local anaesthetic is fully working before proceeding with the surgery. After the local anaesthetic injection you should feel no further pain. The actual operation takes about 15 min.

I usually use 4 or 5 stitches in the wound. The wound is then covered with a sticky dressing followed by some wool and crêpe bandage. When the local anaesthetic wears off at around 2 hours the pain is usually minimal. Painkillers are rarely required. The bandage can be removed, by you, at 24 hours. The hand can be washed in normal soap and water with the stitches in place. I am happy for patients to do this from 72 hours after the surgery. The wound does not necessarily need a dressing after this time but most patients prefer to keep the wound covered for comfort as they return to work. The hand can be used immediately for all normal daily activities. It is usually safe to return to driving within a couple of days of the surgery.

I see my patients for suture removal at 2 weeks. We will then check the result. At this point there is usually no triggering but the wound is often thick and swollen. A small amount of opening of the wound is fairly common as I use a skin crease incision. This will heal well in the long-term but short-term may need a further dressing with a simple dressing such as an Elastoplast.

Mark Phillips
Consultant Hand & Wrist Surgeon
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