

Atypical Symptoms of Trigger Finger in the Adult Population

Background: Stenosing tenosynovitis, or trigger finger (TF), classically presents with pain at the A1 pulley, clicking, catching and/or locking of the finger. However, in clinical practice, patients may exhibit symptoms other than those listed above, described as “atypical” symptoms. The purpose of the study was to identify “atypical” symptoms of TF in the adult population with the hypothesis that these patients undergo more advanced imaging prior to referral.

Methods: We conducted a retrospective chart review of adult patients presenting as new patients to a single-institution orthopedic hand surgery clinic over a five-year period. We collected age, sex, medical co-morbidities, advanced testing prior to referral, subjective symptoms, clinical exam findings, number of corticosteroid injections, improvement following injections, and surgical release.

Results: 183 patients were included in the study. 96.7% (N=123) exhibited classic symptoms, 96.1% of whom experienced pain at the A1 pulley, while only 33.6% and 38.3% exhibited catching or locking, respectively. The most common “atypical” symptoms were pain with grip (28.9%), finger stiffness (24.2%), and finger swelling (18%). These patients were 2.6 times more likely to undergo radiographs prior to referral (95%CI: 1.11, 6.0, P=0.027). All patients with “atypical” symptoms underwent at least one corticosteroid injection but were 53% less likely to have surgery (95%CI: 0.21, 1.11; P=0.08).

Conclusion: Patients with TF can present with a wide range of symptoms outside of those classically associated with the condition. Although TF is diagnosed clinically, “atypical” symptoms may confound the diagnosis, leading to increased rates of advanced imaging.