



Trigger Thumb

Patient information Leaflet

May 2020

This leaflet aims to help you understand what trigger thumb is and how we treat and care for children with this condition.

The aim of this leaflet is to answer some of the questions that you or your child may have about trigger thumb and its treatment. You will also have an opportunity to discuss any further concerns with us in pre-operative clinic and on the ward.

WHAT IS TRIGGER THUMB?

Trigger thumb is a condition seen in young children where the thumb gets stuck in a bent position as the tendon is unable to glide freely. If you feel carefully at the base of your child's thumb you can feel the rucked-up tendon as a nodule (about the size of a pea). Usually the thumb is able to be straightened to start with but can become fixed. In 1 out of 3 patients it occurs in both thumbs.

WHAT IS THE CAUSE?

We are still unsure of the cause, but following newborn screening it has been found that it is not present at birth but appears in the first two years of life.

WHAT IS THE NATURAL PROGRESSION?

In 30% of infants younger than nine months old, trigger thumb will get better without treatment. In thumbs that don't improve and stay flexed, the joint can get very stiff and also stuck, which can cause functional problems later in life.

WHAT IS THE TREATMENT?

If after a few months the trigger thumb has not improved by itself, then surgery is the next step. This is done as a day case under a general anaesthetic.

WHAT IS INVOLVED WITH THE OPERATION?

Through a small horizontal skin crease incision over the lump, the tight tunnel that the tendon glides in is released. Care is needed to avoid the tiny nerves that supply the sensation to the tip of the thumb. Usually dissolvable stitches are used, with a dressing and a crepe bandage that stays on for a couple of weeks. The nursing staff will give you instructions regarding looking after your child's dressing and any follow-up appointments.

WHAT HAPPENS AFTER THE OPERATION?

- The nurse will monitor your child's condition by checking their observations and for any signs of bleeding.
- Your child will be offered sips to drink and a light snack.
- We encourage all patients who have had a general anaesthetic to have a sleep to help them recover from the operation.
- You will be able to go home once you have recovered from the operation.

HOW LONG WILL MY CHILD BE IN HOSPITAL FOR?

Your child will come into hospital, have the operation and usually go home on the same day. They will be admitted to the Children's Unit. Parents have open visiting times, and other relatives can visit between 13:00 and 20:00. Some children may need to stay in hospital overnight and a parent is able to stay overnight with them.

WHAT HAPPENS TO MY CHILD WHEN WE ARRIVE AT THE CHILDREN'S UNIT?

- A nurse will admit your child onto the unit check personal details and take their pulse, temperature, oxygen saturations and blood pressure. Please tell the nurse if they have any known allergies or take any medication. Please bring any medication with you on the day. Please ensure you also inform the nurse if they have any other medical conditions.
- You will be asked to sign a consent form if you haven't already done so in the pre-operative clinic. If your child is having a general anaesthetic, you will be given staving instructions before admission in their admission letter. Please do not allow your child to chew gum as this causes an increase in saliva.
- Your child will be given a hospital gown to wear. Please also bring slippers, dressing gown and any teddy bears/dolls/toys for comfort.
- A nurse will apply Ametop cream/EMLA ('Magic Cream') if required to numb the area where your child will be cannulated.
- A play specialist will also conduct a pre-operative talk with you and your child. They are involved in helping your child to understand the procedure and distracting your child in the anaesthetic room.

WHAT HAPPENS AFTER MY CHILD'S OPERATION?

After the operation, your child will be taken to the recovery room and you will be able to accompany them back to the ward when they are awake. A nurse will check your child's observation. The nurse will monitor your child's pain, and give pain medication if required. Your child may feel sleepy after a general anaesthetic. They will have a cannula in-situ which will be removed prior to discharge. Your child will be offered sips of water, and then light diet when they are ready. Once your child has recovered, and the medical and nursing team agree your child is well, you can go home.

GOING HOME

- Please ensure you have paracetamol and ibuprofen at home for your child before your appointment. Give pain relief as needed once discharged home. Do not give more than advised on the label.
- You should stay with your child for at least 24 hours following their surgery.
- If a follow-up appointment is needed, a letter will be sent to you with the appointment details. If any stitches need to be removed, an appointment will also be made for this.
- If you are worried about your child's condition, please contact your GP or if necessary attend the Accident & Emergency Department.

WHEN WILL MY CHILD BE ABLE TO RETURN TO SCHOOL?

Your child will need 24 hours off school.

WHO SHOULD I CONTACT IF THERE IS A PROBLEM FOLLOWING MY CHILD'S SURGERY?

Useful Contact Numbers:

- Children's Unit 0161 922 5252 (24 hrs)
- Children's Community Team 0161 922 5251 (08.00-20.00 mon-sun)
- NHS Direct 111 (24hr helpline)
- You can also contact your GP for advice.

Useful Websites/information:

- Department of Health (www.dh.gov.uk)
- NHS Choices (www.nhs.uk/conditions)
- NHS institute for innovation and improvement (www.institute.nhs.uk)
- NHS Improvement (www.improvement.nhs.uk)

Adapted from Royal Berkshire NHS Trust's 'Trigger Thumb Information Leaflet'.

If you have any questions you want to ask, you can use this space below to remind you

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

If you require an interpreter, please ask an appropriate person to contact our central booking office between Monday to Friday 8am to 5pm on 0161 922 6991 to arrange this for you.

語言 翻譯及病者支持服務 (LIPS):

如果閣下需要翻譯員在您的預約當日幫助您的話 請找一名合適的家庭成員 **0161 922 6991** 聯絡本中央預約辦事處來您您安排 我們的辦公時間是星期一至星期五 上午 8 時至下午 5 時

Językowo Tłumaczeniowa Usługa Pomocy dla Pacjenta (Language, Interpretation and Patient Support Service LIPS):

Jeśli potrzebujesz pomocy tłumacza w trakcie swojej wizyty, proszę poprosić odpowiedniego członka rodziny o skontaktowanie się z Centralnym Biurem Zamówień (*Central Booking Office*), w celu zorganizowania tłumacza pomiędzy poniedziałkiem a piątkiem w godzinach od 08:00 - 17:00 pod numerem **0161 922 6991**.

لینگویج، انٹریپریٹیشن اینڈ پیسٹنٹ سپورٹ سروس (Lips)

اگر آپ کو اپنی اپائنٹمنٹ کے لئے مترجم کی مدد کی ضرورت ہو تو براہ مہربانی اپنے خاندان کے کسی موزوں فرد سے کہیں کہ وہ ہمارے سنٹرل بنگ آفس سے پیر سے جمعہ 8.00 بجے صبح سے 5.00 بجے شام کے دوران 01619226991 پر فون کر کے اس کا بندوبست کریں۔

Author: Jonathan Rudd
Division/Department: Women and Childrens
Date Created: August 2015
Date reviewed: May 2020
Reference Number:
Paed 010
Version: 2.0