While pain near the thumb is a common complaint, that pain can result from multiple conditions, including arthritis, tendinitis, nerve entrapment, or trauma. The three most common causes of thumb pain are thumb base arthritis, radial wrist tendinitis (deQuervain’s tenosynovitis), and trigger thumb.

**Thumb Base Arthritis**

Arthritic degeneration of the thumb base is a common cause of thumb pain and is more often found in females. Cartilage wear of the thumb base can occur from an injury to the joint, but it most often occurs insidiously from generalized use and overuse. As the joint wears, pain and eventual contraction of the thumb toward the palm result. Activities requiring firm grasping are generally painful with this condition.

**Oral anti-inflammatory medications (ibuprofen, naproxen, Celebrex®, etc.), splinting, and activity modifications are usually sufficient to relieve the pain in the early stages.**

There are three general surgical procedures used to treat thumb arthritis: fusing the joint, removing the joint, or replacing the joint. The decision to perform any one of these procedures is determined by the patient’s age, physical demands, degree of arthritis, and level of joint instability. Any of these surgeries requires at least six to eight weeks of immobilization and participation in hand therapy during the postoperative period.

**deQuervain’s Tenosynovitis**

Tendinitis near the thumb base at the wrist is often caused by overuse or misuse of the thumb and wrist, but it is also sometimes associated with pregnancy. As the tendons of the thumb base pass through the first dorsal compartment (a tunnel of tissue through which the tendons track), they can swell, leading to additional friction, tearing, and inflammation. These irritants result in wrist pain, often during lifting activities.

Oral anti-inflammatory medications, activity modifications, and splinting are usually sufficient for pain relief. If the pain persists, steroid injections may be beneficial in reducing the inflammation and pain.

Surgical release, which consists of opening the tunnel in which the tendons are entrapped and inflamed, may eventually be necessary. Postoperative hand therapy and splinting for four to six weeks is required to optimize the surgical outcomes.

**Trigger Thumb**

Trigger thumb occurs when the thumb flexor tendon becomes caught in the pulley system in the palm of the hand. While conditions such as diabetes, thyroid disorders, and trauma can cause trigger thumb, this condition most commonly occurs spontaneously without an identifiable cause.

The symptoms of trigger thumb consist of catching, or triggering, of the thumb during flexion and extension, pain in the palmar base of the thumb, and occasional locking of the thumb in flexion. When this occurs, splinting, therapy, and oral anti-inflammatory medications may relieve the pain. However, steroid injections combined with the appropriate activity modifications, splinting, and therapy are often necessary to alleviate this condition.

In approximately 10% of cases, surgical release is necessary to cure trigger thumb. Surgical release, often completed under a local anesthetic, involves opening the pulley to relieve the catching of the flexor tendon.

While this article is just a brief overview of common conditions that may cause pain near the thumb, I hope it provides a better understanding of these occurrences. OE

For more information, visit www.stcroixortho.com or www.orthoinfo.aaos.org.

Nicholas J. Meyer, MD, joined St. Croix Orthopaedics in 2003. He completed his orthopaedic surgery residency at the Medical College of Wisconsin and received fellowship training in hand and microvascular surgery at the University of Minnesota. Dr. Meyer is board certified, a member of the American Academy of Orthopaedic Surgeons, and a candidate member of the American Society for Surgery of the Hand and the Mid-America Orthopaedic Association.