



Intervention	032. Trigger finger release surgery
For the treatment of:	Trigger finger
Commissioning position	<p>This intervention is commissioned if the following criteria have been met:</p> <ul style="list-style-type: none"> • Triggering persists or recurs after: <ul style="list-style-type: none"> ○ splinting for at least 12 weeks OR ○ one steroid injection (potentially a second if there is improvement after the first) <p>OR</p> <ul style="list-style-type: none"> • The finger is permanently locked in a fully flexed position in the palm OR • The person has previously had 2 other trigger fingers unsuccessfully treated with appropriate non operative methods <p>OR</p> <ul style="list-style-type: none"> • The person has Diabetes Mellitus
Summary of Rationale	<p>Treatment with steroid injections usually resolves troublesome trigger fingers within 1 week (strong evidence) but sometimes the triggering keeps recurring. Surgery is normally successful (strong evidence), provides better outcomes than a single steroid injection at 1 year and usually provides a permanent cure. Recovery after surgery takes 2-4 weeks. Problems sometimes occur after surgery, but these are rare (<3%)</p>
References	<p>Trigger finger release in adults - EBI (aomrc.org.uk) https://www.nhs.uk/conditions/trigger-finger/treatment/ BSSH Trigger Finger guidelines</p>
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