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| Intervention | **032. Trigger finger release surgery** |
| For the treatment of: | Trigger finger |
| Commissioning position | This intervention is commissioned if the following criteria have been met:   * Triggering persists or recurs after: * splinting for at least 12 weeks OR * one steroid injection (potentially a second if there is improvement after the first)   OR   * 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 OR * The person has Diabetes Mellitus |
| Summary of Rationale | 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%) |
| References | [Trigger finger release in adults - EBI (aomrc.org.uk)](https://ebi.aomrc.org.uk/interventions/trigger-finger-release-in-adults/#:~:text=Trigger%20digit%20occurs%20when%20the%20tendons%20which%20bend,is%20a%20nuisance%20and%20causes%20infrequent%20locking%20episodes)  <https://www.nhs.uk/conditions/trigger-finger/treatment/>  [BSSH Trigger Finger guidelines](file:///C:/Users/Emma.ONeill/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/DK2ZPMMM/BSSH%20Trigger%20Finger%20guidelines) |
| Effective from: | October 2024 |
| Policy Review Date | October 2027 |