Physical Therapy & Sports Rehab, Inc.

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Trigger Finger

What You Need to Know

What Is Trigger Finger?

Trigger finger — medically called stenosing tenosynovitis — occurs when inflammation narrows the space within the sheath that surrounds the flexor tendon of a finger. When the tendon becomes thickened or develops a nodule, it catches or locks as it tries to glide through the narrowed tunnel at the base of the finger. The result is a finger that stiffens, clicks, or locks in a bent position — and sometimes must be forcibly straightened by the other hand.

Trigger finger can affect any finger, including the thumb (trigger thumb), and multiple fingers can be involved simultaneously. It is more common in women, in people aged 40–60, and in individuals with diabetes, rheumatoid arthritis, or gout.

What Does It Feel Like?

- A clicking or snapping sensation when bending and straightening the finger
- Stiffness in the finger — especially in the morning
- Tenderness and a painful nodule at the base of the finger (in the palm)
- The finger locking in a bent position and requiring the other hand to straighten it
- In severe cases: the finger is locked in flexion and cannot be straightened at all

Grading the Severity

- Grade 1: Pain and tenderness without triggering or locking
- Grade 2: Triggering (clicking/snapping) that resolves on its own
- Grade 3: Triggering that requires the other hand to correct (locked finger)
- Grade 4: Fixed, permanently locked — cannot be straightened passively

How Is It Treated?

- Resting splint — immobilizes the finger in extension to allow the sheath to calm down
- Activity modification — reducing repetitive gripping and tool use

• Corticosteroid injection — very effective, particularly for Grades 1–2; may need to be repeated

• Physical therapy — tendon gliding exercises, gentle stretching, activity guidance

• Surgical release (percutaneous or open) — for Grade 3–4 or failed injections; highly effective

When Should I Be Concerned?

• Finger locked and unable to be straightened

• Multiple fingers triggering simultaneously

• No improvement after 2 corticosteroid injections

The Good News

Trigger finger is highly treatable at every grade. Corticosteroid injection resolves symptoms permanently in up to 70% of patients with a single injection. Surgical release, when needed, is a brief outpatient procedure with an extremely high success rate and rapid recovery.

Trigger finger responds well to treatment — up to 70% of patients achieve lasting resolution with a single corticosteroid injection.