



Understanding The Causes of Trigger Finger & Trigger Thumb and the Role Repetitive Gripping, Squeezing & Pulling Plays In Developing This Injury

By: Gary Majesky, *WSIB Consultant & Executive Board Member*



This month I want to discuss a frequent hand injury electrical workers experience that is best characterized as cumulative trauma disorder (CTD) or repetitive strain injury (RSI). Trigger finger and trigger thumb are common hand injuries that members frequently develop. The endemic physical demands of the electrical trade no matter what branch of the brotherhood you work in exposes members to the risk of a hand or finger injury because there is repetitive, forceful and rigorous use of the hands when working. This may sound rhetorical, but an electrician's hands are their anatomical tools.

What is Trigger Finger

It is a condition that causes pain, stiffness, and a sensation of locking or catching when you bend and straighten your finger. The condition is also known as "stenosing tenosynovitis." The ring finger and thumb are most often affected by trigger finger, but it can occur in the other fingers, as well. A common sensation is a "snapping" or "locking" condition of any digits of the hand when opening or closing.

How do I get Trigger Finger

Trigger finger occurs when the affected finger's tendon sheath becomes irritated and inflamed. This interferes with the normal gliding motion of the tendon through the sheath

Can Trigger Finger Heal On its Own

Often times, if the condition comes on suddenly after a particular activity, it will go away on its own. If the condition has become painful and caused finger stiffness, persisted for longer than six weeks, or if the patient is diabetic, surgical treatment is usually needed

What Causes Trigger Finger

Risk factors for trigger finger include diabetes, rheumatoid arthritis, and repetitive movements. A corticosteroid (cortisone) injection around the affected tendon usually relieves the symptoms of trigger finger. Although the etiology (cause) of trigger finger may be multi-factorial, there is a strong occupational connection in workers that use their hands. Electrical workers fall into this category.

Can I file a WSIB Claim for Trigger Finger

The simple answer is yes. Trigger finger is typically a gradual onset repetitive strain injury that WSIB defines as a disablement injury. However, some workers develop a trigger finger after a crush injury or single episode trauma. In my experience cumulative trauma from repetitive gripping and squeezing is the most common cause when electricians develop trigger finger.

Law and Policy

Subsection 2(1) of the Workplace Safety & Insurance Act defines an accident to include a chance event or disablement arising out of and in the course of employment.

- (a) a wilful and intentional act, not being the act of the worker,
- (b) a chance event occasioned by a physical or natural cause, and
- (c) disablement arising out of and in the course of employment; ("accident")

Trigger Finger Case Law

My research confirms that there are no construction worker trigger finger cases however, the case law does provide ample insight into work related causation and the role systemic diseases may play (diabetes or rheumatoid arthritis). Another clinical observation in the medical reports is trigger finger often occurs in the presence of carpal tunnel syndrome, which is another type of stenosing tenosynovitis that develops as a repetitive strain injury.

In Decision 713/95, a Panel heard an appeal from a worker who claimed they developed trigger finger 18 months after performing work activities they alleged caused the condition. The Panel requested the assistance of a Tribunal Medical Assessor who are experts in their field of medicine to answer a few questions. Dr. Douglas was retained and offered the following opinion:

Trigger finger displays difficulty in flexion and has a tendency to lock in the flexed position ... The locking itself is uncomfortable to painful in the given case. It is sometimes accompanied by an audible snap. A mass is usually palpable at the site of the trigger on the tendon sheath at the base of the affected digit.

Trigger finger, DeQuervain's Disease and carpal tunnel syndrome are all types of stenosing tenosynovitis, and patients with one condition are more likely to have one of the others ... The surgery for release of the carpal tunnel could play no part in the development of trigger finger.

It is very difficult to definitely link the development of a finger trigger to the events of a year and half before. With his history of carpal tunnel syndrome this man was more likely to develop a trigger finger than the average person. If one assumes the exciting cause of this was trauma leading to tenosynovitis, one would expect that when the assumed exciting cause was removed that the trigger finger tendency would be lessened and the situation would improve. This is commonly seen when patients develop a trigger finger which settles down completely



with no other treatment than rest. ... it is not likely that a trigger finger would show no triggering at the time of a presumed cause ... then develop a year and a half after.

In Decision 1649/03 a worker who operated a spray gun developed trigger finger. His job involved taping, sanding and spray painting with a spray gun. The worker estimated that the spray painting component of his job occupied about 90 percent of a typical work day. When the worker developed pain at the base of his right thumb, the employer took him off the spray painting duties and offered him sanding, taping and some staining duties:

In a report dated May 27, 1998, Dr. S.K. Silverberg, internal medicine specialist, documented his findings following an examination of the worker and opined that the worker suffered from tendonitis of the right thumb. Dr. Silverberg related the condition to "more than 30 years of flexing the right thumb to paint with a spray gun at work". He injected the worker with Cortisone and advised that the worker should not return to duties that involved the spray gun.

In a report dated December 15, 1999, Dr. Kovacs understood that the Board had granted entitlement for the right thumb and that the Board denied entitlement for the left thumb. Dr. Kovacs advised:

[The worker] has an exacerbation of flexor tenosynovitis involving both thumbs. His history entails doing repetitive work, using both hands, especially during sanding and taping, as part of his job. I believe that his flexor tenosynovitis of both thumbs is likely secondary to the repetitive work he did with his hands, as part of his job. I would think that he should be entitled to Workmen's [sic] Compensation benefits for flexor tenosynovitis of both hands, rendering him totally disabled at the present time. Each flexor tendon sheath of the thumbs was infiltrated with corticosteroid again today. I have recommended that he be fitted with a resting thumb splint and to continue with Celebrex.

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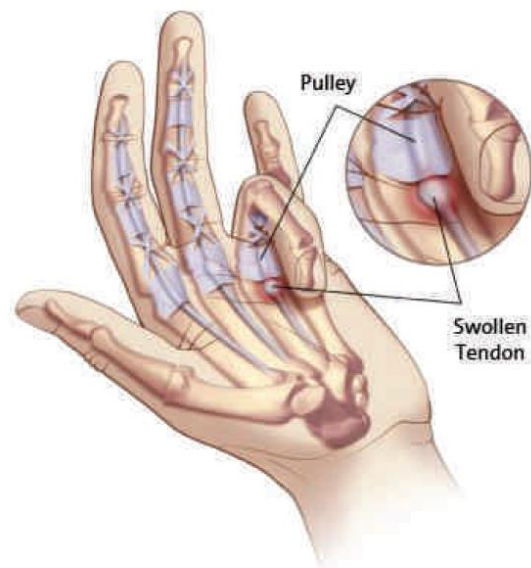
I am satisfied that the preponderance of evidence before me establishes that the worker's left thumb tenosynovitis or "trigger finger" meets the statutory definition of accident under the "disablement arising out of and in the course of employment" branch of the definition. The only countervailing medical opinion is the opinion of Dr. Germansky, a Board Medical Consultant who found no information to support a causal relationship between the left thumb disability and work duties.

Closing Comments

If you have been diagnosed or there is clinical suspicion that you have trigger finger, it is important that you advise your doctor that your job involves repetitive gripping, squeezing, and pulling. These job demands would represent a significant contributing factor in developing trigger finger. Sadly, some WSIB decision makers struggle and fail to understand the work duties of an electrician. That's WHY it's important that you load your gun and bring ergonomic studies to show your health professional so they understand what you do at work, and that you're

hands are constantly being used when using manual or power tools, pulling wire, material handling and most job tasks.

When arguing appeals, I frequently point to our Electrician Ergonomic Research Study and tell the Panel that in every photo there is one common theme. Electrical workers are constantly using their hands. It's obvious but some members are not good communicators, and therein lies half the problem. Members should visit the unions website or email me and I'll forward you the information to show your health professionals. Many clinicians have a vague notion of what your job entails, including WSIB decision makers.



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2020 Annual Award Buffet Brunch

Service Award/Pin Recipients

(Initiated in 1945, 1950, 1955, 1960, 1965, 1970)

Wednesday April 19, 2020 at 10am - 2pm

Parkview Manor Banquet Hall
 55 Barber Greene Rd., Toronto

RSVP Grace at (416) 510-5262 by April 1, 2020