Musculoskeletal Research Facilitation Group (Cat Group) Critically appraised topic and clinical bottom line Date: November 2016

In adults with de Quervain tenosynovitis, are exercises more effective in reducing pain and improving function than usual care?

Clinical Bottom Line

There is no high quality evidence to answer this question.

There is a multidisciplinary treatment guideline which may help in the treatment of de Quervains disease and inform future research. However, this is based on current expert clinical opinion and therefore has limitations. Much of the evidence is based on case reports/studies.

Good quality research is required to answer the question and provide evidence of appropriate exercise.

Why is this important?

Clinicians treat patients with de Quervain tenosynovitis and are often asked to provide hand therapy treatment. Exercises provided are currently based on clinical experience; evidence and research is needed to support practice.

Inclusion Criteria

Adults 18+ treated in a community or secondary care physiotherapy/occupational therapy setting

Search

2000 -2015

Type of Study

RCT, Systematic review, qualitative study, patient satisfaction studies

	Description	Search terms	
Population and	Adults 18+ in primary &	De Quervain stenosing	
Setting	secondary physiotherapy /	tenosynovitis	
	occupational therapy care Thumb pain		
	setting	De Quervain tenosynovitis	
		De Quervain tendonitis	
		De Quervain tendonosis	
Intervention or	Exercise	Physiotherapy	
Exposure		Hand therapy	
(i.e. what is being		Occupational therapy	
tested)		Physical therapy	
		Exercises	
		Stretches	
		Strengthening	
		Active & passive exercises	
		Hand rehabilitation	

CAT Lead: Carol Graham Date CAT completed: November 2016 Email:carol.graham2@ssotp.nhs.uk Date CAT to be reviewed: November 2018

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		Soft tissue mobilisation	
Comparison, if any	Usual care/routine care	Injection therapy Steroids Non-steroidal analgesia Advice/Education Ultrasound Acupuncture Deep transverse frictions Routine/usual care Splints	
Outcomes of interest	Pain Function Return to work Quality of life	Pain Function Return to work Quality of life	
Types of studies		RCT, Systematic review Qualitative study Patient satisfaction studies	

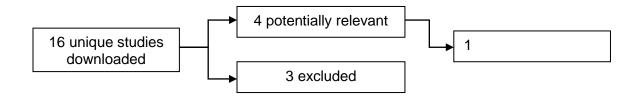
Routine Databases Searched

Clinical Knowledge Summaries, PEDro, BMJ Updates, Clinical Evidence, TRIP, Database,NICE,HTA,Bandolier,The,CochraneLibrary,Medline,Cinahl,Embase,PsycInfo,Professional websites. Joanna Briggs Institute, Web of science, Sports discus and Pub med

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Results



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First Author, year and type of study	Population and setting	Intervention or exposure tested	Study results	Assessment of quality and comments
Huisstede 2014 Consensus Guideline	Patients with de Quervains disease – unclear of age range	Multi - disciplinary treatment for De Quervains disease	Guideline produced through a systematic review & Delphi consensus strategy to gain additional data for a MDT consensus. Guideline gives a therapeutic hierarchy of suitable treatments for de Quervains disease. Consensus that all patients should receive instructions (3 different levels: level 1: activity; level 2: function; level 3 pain) and these should be combined with another treatment (NSAIDs &splinting NSAIDs, splinting & corticosteroid injection; splinting & surgery	35 experts – hand therapist/ hand surgeons participated in the Delhi consensus strategy – each round consisted of a question, analysis and feedback report. Guideline limited as based on current expert opinion.

Summary

There is a lack of evidence relating to the use of exercise for the management of de Quervains disease. The Consensus on a MDT treatment guideline for de Quervains disease may be of use to clinicians involved with this client group as it describes a hierarchy of treatment options including non-surgical and surgical interventions.

Implications for Practice/research

Research is required to establish the benefits and most appropriate type of exercise for this group of patients. Future studies should also compare exercise with other treatment interventions for this group.

What would you tweet?

Limited good quality evidence on use of exercise for management of de Quervains disease, however, multidisciplinary treatment guideline may help guide treatment and inform future research.

References

 Bionka M.A. Huisstede, J. Henk Coert, Jan Friden, Peter Hoogvliet 2014 Consensue on a Multidisciplinary Treatment Guideline for de Quervain Disease: Results from the European HANDGUIDE Study. Physical Therapy vol 8,no 8 p 1095-1110

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