

**Specific Question:**

In adults with chronic DeQuervains tenosynovitis does exercise reduce pain and improve function more than usual care?

**Clinical bottom line**

There is no evidence to answer the question that exercise reduces pain or improves function more than usual care with DeQuervains tenosynovitis.

**Why is this important?**

To ensure that the most effective treatment can be offered to patients as there is currently a misnomer regarding treatment methods. Treatment methods involve splinting, exercise regimes, ultrasound and wax with no clear evidence for effectiveness.

**Search timeframe (e.g. 2006-2016)**

**Inclusion Criteria**

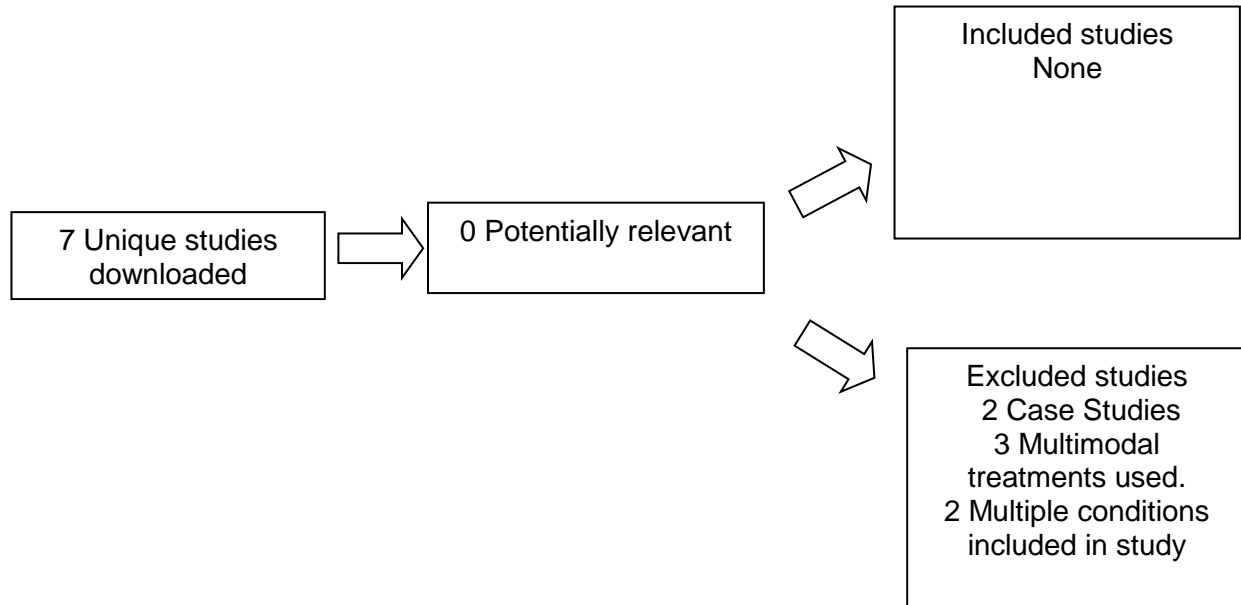
	Description	Search terms
<b>Population and Setting</b>	Male and female adults with DeQuervains	Adults DeQuervains/lateral wrist pain/tenosynovitis/tendinosis/stenosing tenosynovitis
<b>Intervention or Exposure</b>	Exercise	Eccentric Concentric Rehabilitation
<b>Comparison, if any</b>	Splinting Ultrasound	
<b>Outcomes of interest</b>	Pain Function	Pain Function
<b>Types of studies</b>		RCTs Systematic Reviews

**Routine Databases Searched**

Clinical Knowledge Summaries, PEDro, BMJ Updates, Clinical Evidence, TRIP, Database, NICE, HTA, Bandolier, The Cochrane Library, Medline, Cinahl, Embase, PsycInfo, Professional websites, Joanna Briggs Institute, Web of Science, Sports Discus and Pub Med

**Date of search**      **February 2016**

**Results of the search**



**Summary**

There is no good quality evidence to answer the question on the effect of exercise on pain and function in DeQuervains.

**Implications for Practice/research**

Further research required.

**What would you tweet?**

There is no evidence which explores there use of exercise in tenosynovitis.