Intersection Syndrome

INTRODUCTION
You have been diagnosed with intersection syndrome, which is a focal irritation of the tendons at the dorsum of the wrist. This is similar to deQuervain’s tenosynovitis, but tends to be more over the wrist. The problem is usually due to an injury or overuse. Treatment is with bracing, rest, ice, and anti-inflammatory medications.

BACKGROUND
On the wrist and forearm above the thumb, a pair of thumb tendons (abductor pollicis longus and extensor pollicis brevis) cross over another pair of wrist tendons (extensor carpi radialis longus and extensor carpi brevis) and as such, they intersect each other. They are the movers of the thumb and the wrist.

The cause of intersection syndrome relates to overuse of the wrist and thumb from wringing, grasping, turning and twisting motions eventually causes irritation of these tendons. Most of the cases involve a combination of heavy and repetitive use of the wrist and thumb.

DIAGNOSIS
Pain, swelling and redness may occur at the intersection. Squeaking may be heard as the tendons attempt to move against one another. Pain can spread down to the thumb or up along the forearm.

TREATMENT
Resting the sore area will prevent further injury while allowing time to heal. A splint is used to rest the thumb and the wrist. Pain with activity is a sign that irritation is occurring. Avoid movements and activities that increase pain. Take frequent breaks or limit the amount of time you are performing tasks that require repetitive wringing, grasping, push, pulling, turning, or twisting type movements of the wrist. Anti-inflammatory medications work well in conjunction with rest. In more refractory cases an injection of cortisone between the two sets of tendons may give relief. Most cases of Intersection
Syndrome can be successfully treated with these modalities. Surgery is rarely necessary in this condition. In extremely cases that don’t respond to typical treatments, surgical release of the tendons may be indicated.

**EXPECTED OUTCOMES**
The prognosis for functional recovery is very good. In general, tendonitis is successfully treated with conservative measures. Because the prognosis is so good, refractory cases should be closely reviewed with regard to compliance and understanding of treatment recommendations.

**MORE INFORMATION**
Further information can be obtained on the internet. Your local public library can help you explore these sources if you are interested. Two good sites for expert and peer reviewed information are the American Academy of Orthopedic Surgeons at [www.aaos.org](http://www.aaos.org) and [www.emedicine.com](http://www.emedicine.com).

**FEEDBACK**
If you have questions or comments, please contact the office or submit them to the web site at [www.pedortho.com](http://www.pedortho.com).