**INTRODUCTION**

Trigger finger is a common hand disease in adulthood. The literature describes the symptoms of TF with little reference to the broader consequences of the disease.

**OBJECTIVES**

a) To evaluate the impact of TF on motor function, activity and participation (A&P), and quality of life (QOL).

b) To evaluate the possible correlations between personal factors and body functions with activity and participation and with quality of life.

**METHOD**

The severity of TF was graded by hand surgeons. The hand function assessments and questionnaires were administered by experienced occupational therapists to participants immediately after their visit with the doctor.

**Instruments**

Disabilities of Arm Shoulder and Hand questionnaire (DASH); World Health Organization Quality of Life questionnaire (WHOQOL-Bref); Functional Dexterity Test (FDT); Purdue Pegboard Test (PPT); Jamar Dynamometer (JD) & Pinch Gauge (PG).

A principal components factor analysis was conducted for: 1) all subtests of the FDT and PPT; 2) right and left hand JD and PG; 3) all domains of WHOQOL-BREF. Producing three factors: global dexterity function, global hand strength and global quality of life. These factors were used for further data analysis.

**RESULTS**

Factor analysis loadings for each sub-test used to form the factor of global dexterity function, hand strength & QOL.

**DISCUSSION**

- Significant differences were found in all measures.

**CONCLUSIONS**

- TF has a wide impact - beyond the traditional focus on symptoms. These findings are noteworthy because TF is usually discussed in terms of symptoms.

- Hand function can explain a substantial portion of variance in activity and participation but not in quality of life.

**CONTACT**

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