The recent boom of touch screen smart phones has made the users vulnerable to new cumulative trauma disorder involving tenosynovitis of the flexor tendon sheaths. The situation is expected to rise. In these smart phone, one finger use is preferred and mostly the thumb is used for typing and swiping. These repetitive movements done hundreds and thousands of time a day make individuals vulnerable to repetitive strain disorders of the thumb. We report a similar case. Thirty five years old doctor presented with pain and swelling at the ventrolateral aspect of the right wrist for the past 03 weeks. He was right hand dominant. He had a history of excessive use of his newly bought touch screen smart phone for the past one month. On examination he had a soft swelling at the ventral wrist area slightly proximal to the 1st carpometacarpal joint (Figure 1). The swelling was 1.5 by 1 cm, compressible and deep tenderness was positive. There was no history of trauma. Clinically the swelling appeared as tenosynovitis of flexor pollicis longus (FPL). A musculoskeletal ultrasound was ordered to confirm the diagnosis and it revealed tenosynovitis of Flexor carpi radialis tendons sheath in addition to flexor pollicis longus. The patient was advised restriction of the use of thumb and right hand for smart phone use, ice fomentation, thumb spica splint and NSAIDs. The patient was also offered steroid injection into the tendon sheath but he preferred trial of non invasive management. The pain and swelling gradually subsided over a period of 06 weeks.

**Fig 1-** Swelling (tenosynovitis) at the base of right thumb.

**Fig 2-** Complete resolution after 6 weeks

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