My Baby's Finger Cannot Be Straighten ¹Chai JL; ¹Mohd Iqbal HS; ¹Mustaqim A; ¹Han CS; ¹NR A Rahman

¹Orthopedic Department, Hospital Sultan Haji Ahmad Shah, Temerloh, Malaysia

INTRODUCTION:

Camptodactyly is a rare paediatric hand condition, affecting 1% of the population. It is described as flexion contracture of the proximal interphalangeal joint (PIPJ) in one or multiple fingers, most commonly involve little finger.

REPORT:

A 7 months old baby girl brought to our outpatient clinic by the mother when noted her right little finger cannot be straighten fully. It affects only unilateral hand. Antenatally mother was well and she was born via spontaneous vaginal delivery. She was referred by community health clinic doctor as trigger finger of right little finger

Upon examination, the right little finger can be straightened at level of distal interphalangeal joint (DIPJ), however flexible flexion deformity of the PIPJ at about 30 degrees. Baby able to move all other fingers. There was no locking noted over the right little finger.



Figure 1: clinical picture of right little finger



Figure 2: clinical picture of right little finger

This is a rare clinical condition noted on a baby and can be misdiagnosed as trigger finger when similar presentation of cannot fully extend the finger. This condition typically caused by abnormal lumbrical insertion/ origin or abnormal flexor digitorum superficialis (FDS) insertion. It can be classified using Benson classification.

Non operative management is the treatment of choice in majority of cases. Passive stretching and splinting are best for PIPJ contracture < 30 degrees. Operative treatment includes FDS tenotomy or transfer for progressive deformity. In severe fixed flexion, options include osteotomy or arthrodesis.

CONCLUSION:

Camptodactyly easily misdiagnosed as paediatric trigger finger. Reassurance to parents is important.

REFERENCES:

1. Wang et al., urgery and Conservative Management of Camptodactyly in Pediatric Patients: A Systematic Review. *Hand (N Y)*. 2020;15(6):761-770.