INTRODUCTION
Stenosing flexor tenosynovitis (SFT) also referred to as trigger finger, is a common hand disease in adulthood\(^1\), yet there is paucity of information regarding the validity of standard assessment tools for this population. The WHO acknowledges the importance of including health-related quality of life (HRQL) and functional measures in the evaluation of any health condition\(^2,3\).

OBJECTIVES
The purpose of the study was to assess the construct validity of the DASH and WHOQOL-BREF for people with SFT; specifically to evaluate the ability of these measures to distinguish between groups with and without SFT and between clinical grades of SFT.

METHODS
Participants: Sixty five participants with SFT and 71 healthy controls. Participants' symptoms were graded using the Quinnell classification (0, normal movement; 1, uneven movement; 2, actively correctable locking; 3, passively correctible locking; 4 fixed deformity)\(^4\).

Instruments: Quality of life (QoL) was evaluated using the World Health Organization Quality of Life (WHOQOL-BREF) questionnaire\(^5\). It consists of 26 questions with a continuous score scale ranging from 4 to 20. A higher score signifies better QoL. The DASH is a 30-item disability/symptom questionnaire with a scale score ranging from 0 (no disability) to 100 (most severe disability)\(^6\).

RESULTS
Mean difference in QoL and DASH scores amongst different SFT grades - Post hoc comparisons revealed significant differences (p<.05) between grades 1 and 3 and between grades 2 and 3 in QoL and between the grade 1 and 3 SFT sub groups with the DASH.

Significant differences (p<.05) were found between the SFT group and healthy control group in QoL and DASH scores.

SUMMARY
The DASH and WHOQOL-BREF are useful tools to distinguish between participants with SFT and healthy controls and can distinguish between mild and severe clinical grades. The questionnaires may be implemented in the clinical management and research of SFT.

REFERENCES