

TO GLOVE OR NOT TO GLOVE; THAT IS THE QUESTION

I am reminded of my younger years when I knew (or thought I knew) so much more than I know now. So I would like to share a few observations with you, which only points up how much I do NOT know about the subject of elastic gloves.

Some years ago I had a 61 year old physician referred with a diagnosis of pseudo-gout. He complained of pain and stiffness in his hands, particularly upon waking. He demonstrated no observable redness, swelling or other signs of inflammation. There was no joint enlargement or deformity and I was unable to identify any joint tightness although there was some very mild interosseous tightness present.

For years I had given patients with complaints of hand pain from rheumatoid arthritis (RA) elastic gloves to wear during sleep (One US the brand is Isotoner®—a relatively tight elastic glove made for the commercial market but available from medical suppliers.) My cumulative experience had taught me that some patients with RA gained significant relief from the night use of the elastic gloves, while with other patients gained no relief. I could not tell from clinical examination who would or would not benefit, so I would tell patients that I did not know if the gloves would help, but suggested it was a relatively inexpensive

trial I felt worthwhile.

I said the same to the patient with pseudo gout although in the back of my mind I really questioned the value of the gloves in relieving the symptoms of a non-inflammatory presentation. To my surprise the patient reported significant relief and continued to wear the gloves nightly, including when he traveled. He would return occasionally for replacements and told me that when the gloves stretched out he then would apply one well-worn glove over another well-worn glove to give him the level of pressure that provided relief.

What I learned from this patient was:

1. Some patients with arthritis but without obvious inflammation can benefit significantly from night wear of elastic gloves.
2. There appears to be a critical level of pressure for effective relief.

My limited study about the management of lymphedema has taught me that tight gloves (like the Isotoner®) are not desirable to use in post trauma patients because they apply too much pressure to the fragile initial lymphatics, actually preventing lymph flow. There are now lighter-pressure, looser gloves available in the US, sold as “edema” gloves. So the observation I offer is that the greater the edema it seems the looser the glove needs to be, and vice versa. But is this right?

I have read numerous articles reporting the effect of elastic gloves with patients with rheumatoid arthritis, but the type of glove and the tightness are not precisely identified, so the results do not point us toward a more specific application of the gloves. I am not aware of any study about the effectiveness of the edema gloves with trauma patients. So I hope this short discourse encourages you to discuss this with your colleagues and learn from one another more than I know!



It may be desirable to suggest the patient wear the tighter gloves wrong-side out so the extra material at the seams is not bothersome overnight.