Raynaud's phenomenon
Raynaud's phenomenon is the short-term interruption of blood flow to the extremities, such as the fingers and toes. Raynaud's phenomenon may be a sign of an underlying autoimmune disorder such as scleroderma or lupus, so it's important to see your doctor for diagnosis.

Management options include avoiding cold weather and sudden temperature changes.

Raynaud's phenomenon is a condition that can cause discomfort as the blood supply to your fingers and toes becomes reduced. When this happens, you'll notice your fingers or toes change colour. It can happen in cold temperatures or emotionally stressful situations.

Raynaud's phenomenon can be primary, where it occurs on its own, or it can be secondary when it’s linked to another disease or condition. Raynaud’s phenomenon can last from just a few minutes to many hours.

Around five per cent of the population has the condition to some degree. It’s much more common in women and girls, with those under the age of 25 more commonly affected.

Raynaud's phenomenon doesn't usually cause permanent damage. However, it can be a symptom of more serious underlying illnesses, so it’s important to see your doctor if you experience it.

Symptoms of Raynaud's phenomenon

The body prevents heat loss in cold weather by redirecting the blood away from the extremities such as the fingers and toes. In a person with Raynaud’s phenomenon, this reaction is exaggerated. The blood vessels constrict tightly, starving the tissues of blood and causing the characteristic blue or white colour change. When blood flow returns, the skin turns from blue to red and finally back to the normal pink colour. Circulation to the rest of the body is generally perfectly normal. There can also be pain, tingling and numbness in the fingers or toes.

Primary Raynaud's phenomenon

Primary Raynaud’s phenomenon (or Raynaud’s disease, or just Raynaud’s) is the most common form of Raynaud’s phenomenon. It’s referred to as ‘idiopathic’ because there is no clear underlying cause. It’s often so mild that the person never seeks medical attention.

Secondary Raynaud's phenomenon

Secondary Raynaud’s phenomenon is generally more complex and serious than primary Raynaud’s. The most common causes of secondary Raynaud’s are underlying autoimmune disorders such as rheumatoid arthritis, scleroderma and systemic lupus erythematosus (SLE or lupus).

Other common causes of secondary Raynaud’s phenomenon are:
- mechanical vibration – such as using a power tool (for example chainsaws, sanders or hammer drills) for long periods. This is known as ‘industrial white finger’
- atherosclerosis – a condition that involves narrowing of the arteries caused by a build-up of fatty plaques
- smoking – constricts blood vessels
- some medications – such as beta blockers, which contain ergotamine, certain chemotherapy agents and medication that causes blood vessels to narrow
- frostbite.

Diagnosing Raynaud’s phenomenon

It’s not hard to diagnose Raynaud’s phenomenon, but it’s sometimes hard to tell the difference between the primary or secondary form of the disorder.

Your doctor may use a range of methods to decide which form a person has, including:
- a complete medical history
- physical examination
- blood tests
- examining fingertip tissue with a microscope.
Treating Raynaud’s phenomenon

For most people, primary Raynaud’s phenomenon is a nuisance rather than a disabling condition. However, if Raynaud’s phenomenon does occur, warming the body and the extremities is helpful. If you’re outside, go indoors and soak fingers or toes in warm water. If a stressful situation triggers the attack, try to remove yourself from the situation and relax.

The general response to secondary Raynaud’s phenomenon is to treat the underlying illness (such as lupus or rheumatoid arthritis). In severe cases, to prevent tissue damage you may be prescribed medication that dilates your blood vessels. Surgery may be needed if you develop skin ulcers or serious tissue damage.

Preventing Raynaud’s phenomenon

There is no cure for Raynaud’s phenomenon. Managing the condition requires avoiding known triggers, particularly exposure to cold temperatures.

Some suggestions include:

- Avoid prolonged exposure to cold weather or sudden temperature changes, such as leaving a warm house on a cold day or air conditioned rooms in hot weather.
- Make sure your whole body is kept warm, using several layers of clothing to trap body heat. Keep your extremities warm with gloves and woollen socks. Some people also find it helpful to use hand warmers available from outdoor shops.
- Be aware that even holding something cold, such as a can of drink, can trigger symptoms.
- Don’t smoke cigarettes or drink caffeinated beverages, as nicotine and caffeine constrict blood vessels.
- Review your medications with your doctor. You may need to find alternatives to medications that cause you to experience a Raynaud’s attack.
- Learn to recognise and avoid stressful situations. Stress and emotional distress can trigger an attack, particularly for people with primary Raynaud’s phenomenon.
- Relaxation may decrease the number and severity of attacks you experience.
- Keep a journal detailing when episodes occur. Triggers for these episodes may become evident.
- Look after your hands and feet. Dry hands and feet can develop skin cracks, so it’s important to moisturise them to prevent dryness. Protect your hands when in water with barrier creams or rubber gloves.
- Exercise regularly to maintain blood flow and skin condition. Physical activity can also help increase your energy levels, control your weight, improve your cardiovascular (heart) fitness and help you to sleep better. Talk to your doctor before starting any exercise program.
- Eat a healthy and well balanced diet for general overall good health.

Complications of Raynaud’s phenomenon

In most cases, Raynaud’s phenomenon is harmless and has no lasting effects. However in severe cases loss of blood flow can permanently damage the tissue.

Complications of severe Raynaud’s phenomenon include:

- impaired healing of cuts and abrasions
- increased susceptibility to infection
- ulceration
- tissue loss
- scarring
- gangrene.

Talk with your doctor if you notice any of these problems or if you notice other changes to your symptoms.

Where to get help

- Your doctor
- Musculoskeletal Australia, National Help Line Tel. (03) 8531 8900 or 1800 263 265

References

- Questions and answers about Raynaud’s phenomenon, National Institute of Arthritis and Musculoskeletal and Skin Diseases, USA. More information here.
- Raynaud phenomenon, Medline Plus, National Institutes of Health, USA. More information here.
- Raynaud’s disease, Mayo Clinic, USA. More information here.
- Raynaud’s phenomenon, Arthritis Research UK. More information here.
- Patient education: Raynaud phenomenon (beyond the basics), UpToDate. More information here.

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More information

Immune system

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- Immune system explained
- Lymphatic system
- Spleen
Lupus

Autoimmune disorders

Immune system explained

- Immune system explained
  The immune system remembers every germ it has ever overcome...
- Vaccines
  Vaccines trick the body into building immunity against infectious diseases without causing the actual disease...

Lymphatic system

- Fluid retention (oedema)
  Fluid retention (oedema) occurs when fluid isn't removed from the body tissues, including the skin. Causes include the body's reaction to hot weather, a high salt intake, and the hormones associated...
- Lymphatic system
  The lymphatic system manages fluid levels in the body, filters out bacteria and houses types of white blood cells...
- Lymphoedema
  Women who have undergone treatment of breast cancer are particularly susceptible to lymphoedema of the arm...
- Lymphoma
  Lymphoma is a general term for a cancer that begins in the lymphatic system...

Spleen

- Spleen
  Surgically removing a diseased or damaged spleen is possible without causing any serious harm to the person...
- Splenomegaly
  Any conditions that cause a rapid breakdown of blood cells can place great strain on the spleen and make it enlarge...

Lupus

- Lupus
  Lupus can be mild or life-threatening, depending on which tissues are affected...
- Lupus and infections
  The most common infections for people with lupus include those of the respiratory tract, skin and urinary system...
- Lupus and medication
  Lupus most commonly appears in women of childbearing age...
- Lupus and pregnancy
  Lupus can be controlled with medications, so the majority of affected women are able to have children...

Autoimmune disorders

- Addison's disease
  Most cases of Addison's disease are caused by an autoimmune response that attacks and damages the adrenal glands over time...
- Autoimmune disorders
  There is generally no cure for an autoimmune disorder, but the symptoms can be managed...
- Chronic fatigue syndrome (CFS)
  Myalgic encephalomyelitis, commonly known as chronic fatigue syndrome, can affect people of any age, including children...
- Diabetes type 1
  Type 1 diabetes can affect anyone of any age, but is more common in people under 30 years...
- Guillain-Barré syndrome
Most people with Guillain-Barré syndrome experienced some form of viral or bacterial infection before the onset of symptoms.

- Henoch-Schönlein purpura
  Henoch-Schönlein purpura causes a purple spotted skin rash which lasts around one to four weeks, and is often marked by relapses.

- HIV
  In Australia, HIV is most commonly spread when having sex without a condom and when sharing needles and other injecting equipment.

- Idiopathic thrombocytopenic purpura (ITP)
  Idiopathic thrombocytopenic purpura (ITP) is a rare autoimmune disorder in which a person's immune system destroys the platelets that help their blood to clot.

- Lipoedema
  Lipoedema is a painful, chronic, symmetrical swelling in the legs, thighs, buttocks and sometimes arms due to the accumulation of fat in the subcutaneous tissues. The onset often occurs during puberty.

- Myasthenia gravis
  Myasthenia gravis is an autoimmune disease that causes muscle weakness.

- Polymyositis
  Polymyositis is hard to diagnose and may be mistaken for muscular dystrophy.

- Reactive arthritis
  Reactive arthritis is a form of arthritis that occurs as a result of some bacterial infections.

- Retroperitoneal fibrosis
  Retroperitoneal fibrosis is the abnormal growth of tissue on and around abdominal structures, including blood vessels and ureters.

- Rheumatoid arthritis
  Early treatment of rheumatoid arthritis is important in helping you manage the condition more effectively.

- Scleroderma
  The most common symptom of scleroderma is a thickening and hardening of the skin, particularly of the hands and face.

- Sjögren’s syndrome
  Sjögren’s syndrome can be managed with medications and products such as artificial tears and saliva.

- Thyroid - Hashimoto's disease
  Hashimoto's disease progresses very slowly over many years, so the symptoms may go unnoticed.

- Thyroid - hyperthyroidism
  Hyperthyroidism can be diagnosed with a simple blood test that measures thyroid hormone levels.

Related Information

- Blood and blood vessels
  Bleeding, blood pressure, conditions, risks and blood products.

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- Scleroderma
  The most common symptom of scleroderma is a thickening and hardening of the skin, particularly of the hands and face.

- Hughes syndrome
  Hughes syndrome is thickening of the blood caused by abnormal immune system cells.

- Polymyositis
  Polymyositis is hard to diagnose and may be mistaken for muscular dystrophy.

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