
BASE OF THUMB ARTHRITIS / TRAPEZIECTOMY

The trapezium is a small bone in your wrist that forms a joint with your thumb bone at the base of your thumb.

Swelling and inflammation due to arthritis at this joint causes pain on movement of the thumb. Initially the pain may be worse in the morning and then settle as the joint loosens up. However, as the arthritis worsens the duration of the pain will increase and a deformity of the bone at the base of the thumb may also occur.

The pain is usually most severe when using a forceful turning action such as opening jars, turning keys or a door handle. Pain is also produced by a pinching action and eventually this action is weakened.

The problem is more common in women than men.

CONSERVATIVE TREATMENT

There is no cure for arthritis and conservative treatment is aimed at relieving the symptoms.

Non-steroidal anti-inflammatory medications (NSAIDs) may be used to reduce the swelling and inflammation. These drugs are used with extreme caution if you have a history of gastric ulcers.

A brace may be used to support and limit the movement in the base of the thumb. It is recommended that the brace be used for most of the day.

Cortisone injection into the wrist may provide relief for some weeks. A small dose of the drug is injected and usually has no harmful side effects.

SURGICAL TREATMENT

Severe pain despite the conservative treatment is an indication for surgery.

The surgery performed is called a Trapeziectomy. This is combined with a procedure called ligament reconstruction, tendon imposition (LRTI).

A cut about 4 cm long is made on the back of your hand at the base of your thumb to remove the arthritic bone. Other small cuts (usually 3) are made up your forearm to divide part of a ligament. This is then used as a living 'cushion' to replace the bone that has been removed.

AFTER CARE

- Usually people stay in hospital for 2 nights following the surgery. A plaster half cast and bandage is applied to your hand and forearm in surgery. This remains in place until you see your surgeon again. If the bandage feels tight it may be loosened carefully.
- You should start gentle, full range of movement exercises of your fingers as soon as you are awake after surgery. Your thumb must be kept still. The half cast will mean that you are not able to bend your wrist.
- Keep the bandage clean and dry. Use a securely taped plastic bag over your hand when showering.
- Keep the arm elevated as much as possible in the first week to reduce swelling and pain. Pain control tablets may be needed in the first few days. Drinking alcohol should be avoided as this can increase the swelling in your hand.

- An appointment will be made for you to see your surgeon in 10 to 14 days post surgery at which time your wounds will be checked and stitches removed.
- At this time either a full cast will be applied to limit movement or a referral made to a Hand Physiotherapist for a brace to be made to allow early movement. This decision will depend on the condition of your wrist at the time of surgery. The cast or brace will cover your arm from just below the elbow and up to the tip of your thumb, leaving your fingers free. They remain in place for a total of 5 weeks from surgery.
- When the cast is removed your thumb and wrist will be stiff and you will require physiotherapy to regain optimum movement.
- You should not drive a car during the period your hand is in any sort of cast or brace, as you will be unable to control the steering wheel in an emergency situation.

COMPLICATIONS

There are always some risks with any surgery. These include:

- The possibility of infection. This is low and antibiotics are usually given during surgery to reduce the risk even more.
- Bleeding around the wound.
- Deep Vein Thrombosis (DVT). This risk is low unless you have had a DVT or have a family history of this.

Please inform your doctor if this is the case:

- A rare but possible complication is called Reflex Sympathetic Dystrophy, the exact cause of which is not known. The symptoms include severe burning pain in the whole limb, swelling, acute sensitivity to touch, muscle spasms and sweating. These symptoms can last from 6 to 18 months and may not fully resolve.

Specific risks for this surgery are:

- bleeding in the hand.
- damage to the local nerves around the operation site resulting in localised numbness.
- damage to the nerve supply to the thumb
- damage to the tendons in the thumb.
- stiffness in the hand and fingers.
- the surgery may not be successful in relieving the symptoms.

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