

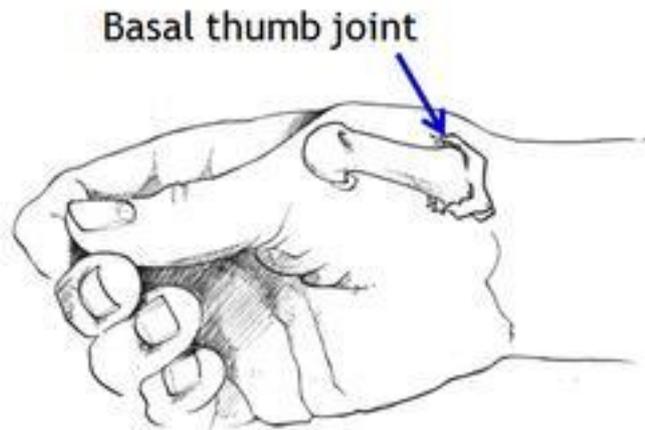
Trapeziectomy

Base of Thumb OA Surgery

To learn more about 'arthritis at the base of the thumb' please see our information sheet.

Surgery is a last resort, as the symptoms often stabilise over the long term and can be controlled by the non-surgical treatments which is detailed in our OA base of thumb information

The most common surgical procedure is called a Trapeziectomy, which is when the Trapezium bone is removed. This is a bone at the base of the thumb, which forms part of the arthritic joint. The space where the trapezium was, is filled with a spongy pad of scar tissue. Instead of bone rubbing on bone, the pad creates a new joint. The operation can usually be carried out under regional anaesthesia. If regional anaesthesia cannot be done, you will be given a general anaesthetic.



Milestones

- 0-2 weeks – Your hand will be placed in a bulky plaster cast to protect the joint. This must stay on for 1- 2 weeks until you come back to the clinic, when it will be removed and a removable splint given.
- 2-4 weeks – Wearing the removable splint, you can use your hand for light activity/movement exercises
- 4-6 weeks- May be able to return to work for (sedentary work)
- 4-6 weeks - driving dependent on pain levels
- 6-12 weeks- Return to work for manual jobs
- 6-12 weeks- Swimming any stroke
- 3-6 months- Full return to sport and activities

Benefits

- Pain relief- Complete pain relief is possible in 80% of the cases. This will take 3-12 months.
- Improving Function – a return to normal use of the thumb in everyday activity

Risks and Consequences

Pillar Pain/Scar pain	Affects 20% or 1 in 5 people	In this case it may take 6-12 months for scar pain to settle
Infection	Affects 1% or 1 in 100 people	This is generally treated with oral antibiotics. Occasionally may need re-admission for Intravenous (I.V.) antibiotics or further surgery
Thumb weakness/deformity		Rarely, the thumb can appear deformed and feel weak due to shortening. Usually, the strength improves within 6 months.
Complex regional pain syndrome	Affects 0.2% or 1 in 500 people	This can be a very serious consequence with some permanent changes including stiffness in the hand and arm. CRPS can usually be avoided by staying motivated with elevation, movement and scar massage.
Nerve injury (1:700)-	Affects 0.14% or 1 in 700 people	This is very rare but consequences may be prolonged pain, further surgery and permanent disability.
Pain	Affects 20% or 1 in 5 people	Although the intended benefit of surgery is complete pain relief, sometimes there can be some residual pain following surgery