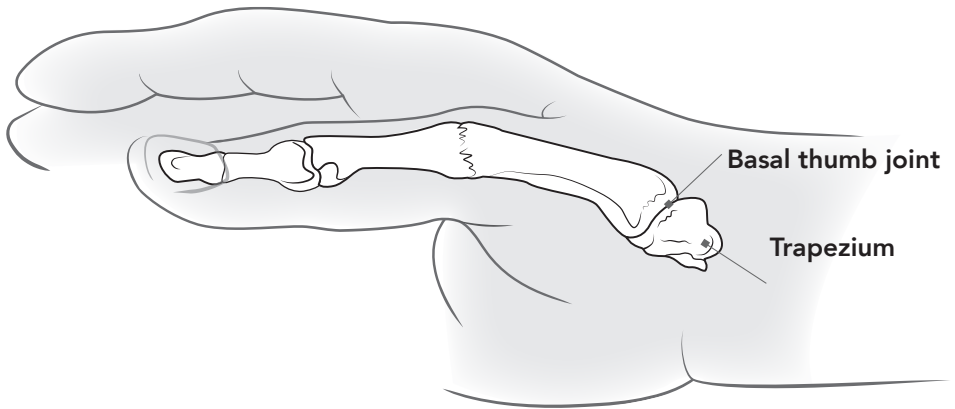


Information about

Base of Thumb Arthritis

What is Base of Thumb Arthritis?

It is osteoarthritis at the joint at the base of your thumb. This condition is painful, and it can be difficult to do things like opening jars.



Osteoarthritis is wear and tear arthritis. This is where the smooth cartilage surface covering the end of the bones in joints becomes thin and rough. The end of the bones can then rub together causing pain. This is common in the joint at the base of your thumb between the metacarpal and trapezium bones. Many people have signs of thumb arthritis on an X-ray.

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What are the symptoms of Base of Thumb Arthritis?

The symptoms are:

- Pain at the base of the thumb, aggravated (made worse) when using the thumb.
- Tenderness if you press on the base of the thumb.
- Difficulty with tasks such as opening jars, or turning a key in a lock.
- Stiffness of the thumb and some loss of ability to open the thumb away from the hand.
- In advanced cases, there is a bump at the base of the thumb and the joint in the middle of the thumb may hyperextend, giving a zig-zag appearance.

What will happen to my thumb?

It is likely that over time the pain will get better in your thumb. This is because the painful cartilage will wear away, this is what you might call the arthritis 'burning itself out'. It may take several years for the pain to improve, so here are some "simple measures" you can try to reduce your pain:

- Avoid activities that cause the pain.
- Painkiller and, or anti-inflammatory medication. A pharmacist or your GP can advise you on this.
- Using a splint to support your thumb and wrist can be helpful. You don't have to wear this all day, just when your thumb is painful.

Arthritis UK have produced a useful practical guide to looking after your joints with arthritis. It provides more detailed information on how to protect you joints, when and how to use splints and what activities you can do to strengthen your joints without damaging them. This is the link to their website:

🌐 <https://www.versusarthritis.org/about-arthritis/managing-symptoms/joint-care/>

You can request a paper copy by contacting the orthopaedic team on the helpline below.

What are the treatment options?

If you are unable to control your pain with simple measures the other possible options are:

- A steroid injection improves pain in many cases, though the effect may wear off over time. The risks of the injection are small, but it very occasionally causes some thinning or colour change in the skin at the site of the injection. Improvement may occur within a few days of the injection but can often take several weeks to be effective. We can repeat the injection if needed but it likely to be less successful each time it's repeated.
- Surgery is a last option. As we know that the pain is likely to settle down with time, we advise trying to manage this condition with non-surgical treatment rather than having something permanently done to your thumb that will affect the grip of your hand long-term.

What does the surgery involve?

The most common types of surgery for base of thumb arthritis are trapeziectomy or fusion of the joint.

- Trapeziectomy involves removing the whole trapezium bone and leaving a gap between the bones. In certain cases, we can combine this with reconstruction of the ligaments.
- Fusion of the joint to make it stiff so that it no longer moves at all.

What is the success and what are the risks of surgery?

Both these surgeries will lead to reduced strength in the grip of your hand. The risks include infection, stiffness of the hand, nerve injury leading to numbness or pain in part of your hand, reduced grip strength and rarely a condition called complex regional pain syndrome.

Sometimes after the surgery, you will need a plaster cast on your wrist for a few weeks, although in many cases you will just need a bandage and a removable splint. It can take several months for the pain and swelling in your hand to improve after surgery. Therefore, we will only consider surgery if your pain and limitation is severe.

What do I do now?

We do not routinely provide a hospital appointment.

After reading this leaflet if you think that you do not need treatment at the moment you do not need to take any further action. You can get advice from us directly in the future if your symptoms get worse.

Please contact us on the number provided on the covering letter if you wish to discuss further.

