

## GENERAL GUIDELINE

### 0-48 hours

- Keep hand elevated to minimise swelling.

### 0-2 weeks

- In plaster cast, do gentle exercises hourly.

### 2-6 weeks

- New exercises shown in physiotherapy.
- Cast should be worn at all times except hand washing and exercises.
- Hand at this stage should not be used for lifting or gripping.

### 6-8 weeks

- Wean off splint during day and use hand for light activities.
- Avoid activities that cause pain.
- **Continue to wear splint at night** at this stage until 3 months post op.
- Light pinch grip and gripping exercises begin.

### 8-10 weeks

- Gentle strengthening continued.
- Resume driving.

### 10-12 weeks

- Normal use of hand may be resumed if the joint is stable.

### 3 months

- Night splint discontinued.
- Joints can continue to settle for 6 months+ post op.

**Return to work will depend upon what job you do—check this with your surgeon.**

## COMPLICATIONS OF SURGERY

Occasionally complications can occur, these are:

- Infection
- Radial nerve hypersensitivity
- Median nerve complications
- Complex regional pain disorder
- Excessive swelling

If you require this leaflet in any other format, e.g. large print, please phone  
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# TRAPEZIECTOMY WITH SLING PROCEDURE

*Hand Therapy  
Service*

[www.yeovilhospital.nhs.uk](http://www.yeovilhospital.nhs.uk)

## WHY THIS OPERATION HAS BEEN RECOMMENDED FOR YOU

At the base of the thumb is a small bone called the trapezium which, together with the metacarpal bone above, forms a joint called the carpometacarpal joint (CMC).

Arthritic changes caused by degeneration (wear and tear), trauma or rheumatoid arthritis can affect this joint and cause pain on use of the thumb in daily activities.

Reconstruction of this joint will help to reduce the pain and make it easier to use the thumb.

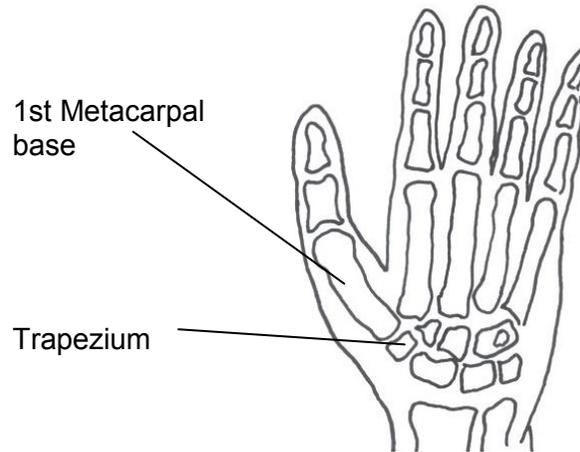
## ON THE WARD

You will be visited by the doctor, which will give you a chance to ask any questions you may have.

## THE OPERATION

The trapezium bone is removed and the base of the 1st metacarpal is trimmed. A soft tissue spacer is made from part of a tendon taken from your wrist and put into this space, this is tied to the base of the first metacarpal and rolled as a spacer, the joint capsule is then closed.

An alternative operation is that the trapezium bone is removed and the capsule closed.



## AFTER THE OPERATION

Your hand and wrist will be in a plaster cast for 10-14 days initially. You will be offered mild pain relief medication for the first few days to help with any discomfort you may have. Severe continuous pain should be reported to your doctor.

## SWELLING

To minimise swelling, it is important to keep the hand elevated.

1. Use the sling provided to keep your hand above your heart for the first 48 hours after surgery.
2. Remove your sling hourly so you can do the exercises described in the next section.
3. When lying or sitting, support your hand on pillows at heart height.
4. If you experience excessive swelling and the plaster becomes too tight, please contact the Plaster

## INFECTION

Please report any signs of infection quickly, these include:

- Increase in pain not related to exercise
- Increased swelling
- Pain in the arm
- 'Flu' type symptoms combined with any of the above

## EXERCISES AT THIS STAGE ARE

Try to do these exercises hourly:

1. Bend and straighten fingers gently (10 times).
2. Bend and straighten tip of thumb, if able (10 times).
3. Bend and straighten elbow (10 times).
4. Lift arm up above the head and down again (10 times).

## CLINIC REVIEW

At around two weeks you will be reviewed in clinic, your stitches will be removed and a new, removable cast, will be made.

This cast should only be removed for exercises and hand washing as the reconstruction is still healing. Overstretching at this stage may affect the stability of your thumb. **The cast should be worn day and night.**

**You will be referred to physiotherapy for further exercises.**