



Duke Orthopaedics: Upper Extremity Division

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CMC Arthroplasty for Basal Joint Arthritis of the Thumb

What is CMC arthritis or basilar joint arthritis of the thumb?

Carpometacarpal (CMC) joint arthritis of the thumb occurs when there is wearing of the cartilage between the first metacarpal and the associated carpal bone, the trapezium. This is one of the most common joints affected by arthritis in the hand.

What does CMC arthroplasty surgery entail?

Dr. Klifto will make 2 incisions to the hand, one on the side of the hand at the site of the CMC joint and one on the back of the hand. He will removed the trapezium and place a device connecting the 1st and 2nd metacarpals to keep the joint in alignment.

Length of Stay

This is same-day surgery not requiring hospital admission as long as there are no complications or other health comorbidities that require attention before discharge. You will need to have someone who can stay the entire length of the procedure and take you home.

Anesthesia

There are multiple types of anesthesia possible for surgery. The first type of anesthesia is a nerve block with sedation so you will not remember the procedure. Your arm will be numb and will feel very strange. The nerve block will last approximately 12 hours. The local anesthesia will last a couple of hours. The second is general anesthesia, which means you are asleep. The anesthesiologist will speak to you on the day of surgery. The ultimate choice of anesthesia technique is up to you and your anesthesiologist.

Incision

You will have 2 incisions on your hand-one is very small on the back of the hand and the other is a bit larger on the side of the hand at the base of the thumb. After the incisions have healed, it is usually fairly thin and not very noticeable.



Pain Control

You will have pain medication prescribed for you prior to discharge. After the nerve block wears off you will have discomfort, so start your pain medicine when the block begins to wear off (feeling tingling in your fingers or able to move the hand more). Pain is usually worst for the 2 days after surgery due to inflammation from the surgical procedure. This should improve greatly in the first 24-48 hours after surgery.

Diet

The combination of anesthesia and pain medications can cause nausea in some patients. If you are prone to nausea or show signs of nausea prior to discharge, a prescription for an anti-nausea medication will be provided. You may wish to advance your diet slowly the day of surgery to avoid exacerbation of nausea. Surgery and the narcotic pain medications are very constipating. Your diet should include plenty of water, fiber, fresh fruits and vegetables.

Dressings

You will go home with a splint that is hard on the thumb and side of the wrist with a soft dressing covering it. This provides immobilization of the thumb where surgery was completed, but the soft dressing allows for swelling. The splint will stay in place until your first post-operative appointment, approximately 2 weeks after surgery.

Physical Therapy

We typically have occupational therapy (hand specialists) scheduled for the same day as your first post-operative appointment with our team to transition into a removable brace. At the 2-week post-operative appointment, you will also be able to initiate range of motion exercises. Occupational therapy typically is completed for around 6 weeks.

Restrictions

Recovery from CMC arthroplasty is approximately 3 months. During that time you will have restrictions on the use of your operative arm.

- Day of surgery-2 weeks: no lifting greater than 1 pound with operative arm. Remain in post-operative splint
- Weeks 2-6: Transition to a removable splint and begin range of motion exercises. No lifting greater than 5 pounds.
- Weeks 6-3 months: Progress activity as tolerated with gradual increase in range of motion and strengthening