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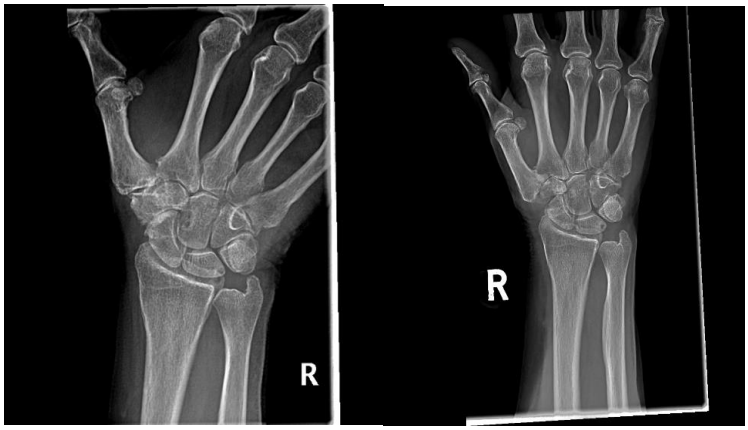
TRAPEZIECTOMY + LRTI

This leaflet provides general information to help you understand trapeziectomy surgery for painful thumb base arthritis.

This day-case procedure removes the worn bone and stabilises the thumb with a tendon.

At the heart of my practice is **Shared Decision-Making**. Whether we pursue conservative management (Plan A) or surgical intervention (Plan B), the goal is to create a tailored treatment plan that aligns with your lifestyle, values, and functional goals.



This leaflet provides general information and does not replace individual medical advice.

Private Consulting Rooms

- **LIPS Healthcare London**
- **Spire Alexandra Chatham**
- **Practice Plus Gillingham**

Practice Manager

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More Info

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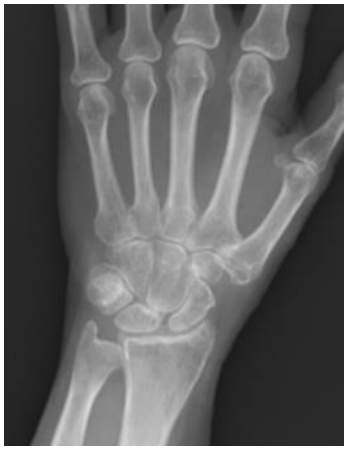
The Anatomy of the Thumb Base

The thumb base is a mobile joint that lets you pinch and grip, relying on several structures working together:

How the Joint Works

A saddle-shaped joint gives the thumb its range:

- The thumb bone meets the trapezium wrist bone
- It works like a 'universal joint'
- This lets the thumb swivel, pinch and grip



The Cartilage

A smooth, slippery coating cushions the two bones so they glide over each other without friction, for pain-free movement.

What Goes Wrong

Cartilage gradually wears away:

- The smooth surface thins over time
- The bones begin to rub together
- This causes pain, swelling and weakness
- Bone spurs and a 'bump' can develop

As It Advances

- Pinch and grip become weaker
- A visible bump appears at the thumb base
- The thumb can take a 'zig-zag' shape
- It often coexists with other hand problems

The Result

Everyday tasks like opening jars, turning keys and pulling zips become painful, though many people have X-ray changes with little pain.

About the Operation

Trapeziectomy removes the worn trapezium bone at the thumb base to relieve pain, and a tendon reconstruction (LRTI) stabilises the thumb. It is a reliable, durable day-case operation, suited to painful thumb base arthritis, particularly with more advanced wear or heavier hand use.

Why It's Done

The operation aims to:

- Relieve pain by removing the worn joint
- Stabilise the thumb with a tendon reconstruction
- Restore comfortable, durable hand function

The Procedure, Step by Step

The operation, step by step:

- Anaesthetic: general anaesthetic, often with a block
- Trapeziectomy: the worn trapezium bone is removed
- Reconstruction: an APL tendon slip stabilises the thumb (LRTI)
- Closure: stitches, dressing and a supportive splint

Before, During & After Surgery

Before Surgery

- Fasting: no food for 6 hours, no drinks for 2 hours before
- Smoking: avoid for at least 12 hours before, to aid healing
- Medications: continue as advised by the pre-op team

On the Day

- Admission: check in at main reception, then to your room
- Consultation: meet your surgeon and anaesthetist
- Preparation: timing and instructions are reviewed

Anaesthesia

- A general anaesthetic is usually combined with a block
- The block numbs the arm and eases pain after surgery

Recovery & Results

Recovery is a partnership. The timeline below is a guide — I will adapt it to your healing and your goals — **this shared decision-making process ensures you are fully informed and involved in your care.**

Recovery Milestones

- Splint: supports the thumb, changed at about 2 weeks
- Hand therapy: a custom splint and exercises for 6–8 weeks
- Stitches: removed at about 14 days
- Good recovery: over 3 months; strength builds up to a year

Results

Trapeziectomy with LRTI is a durable, reliable operation giving lasting pain relief. Strength continues to build for up to a year, and it copes well with heavier hand use.

After Surgery

The first weeks

Dressing & Splint: a splint supports the thumb and is changed at about 2 weeks

Pain Relief: the block lasts several hours; start painkillers before it wears off for 24–48 hours

Hand Therapy: a custom splint and exercises for 6–8 weeks, guided by a therapist

Scar Care: gentle scar massage with cream once healed

Risks & Complications

Uncommon, but possible

Infection: uncommon; treated with antibiotics if it occurs

Scar / Nerve: scar tenderness or temporary numbness near the wrist

Weakness: pinch strength builds slowly and may take up to a year

CRPS: rare (about 1 in 20); prolonged pain and stiffness needing therapy

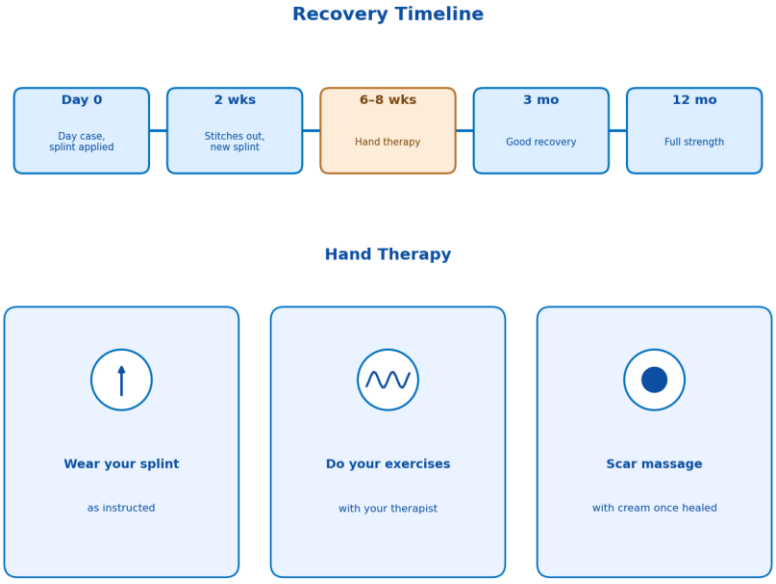
Stiffness: some early stiffness that improves with hand therapy

Return to Activity:

This can be extremely variable and discuss with the surgeon. These are just guidelines.

Desk work **4 – 6 weeks**; light manual work **8 – 10 weeks**; heavy manual work **12–16 weeks**; driving once the splint is manageable and you can do an emergency stop; strength builds for up to a year.

Recovery Timeline & Hand Therapy



Red Flags — When to Seek Urgent Help

Spreading redness, discharge or increasing pain, fever, or a thumb that turns pale or numb — seek urgent assessment. If you experience any of the above, contact the practice, your GP, NHS 111, or attend your nearest Emergency Department.

Key Points to Remember

- A durable, reliable operation for thumb arthritis
- Removes the worn bone and stabilises the thumb
- Hand therapy and splinting are important
- Strength builds up over several months

Questions You May Wish to Ask

- When can I use my hand normally again?
- When can I drive and return to work?
- How much improvement can I expect?
- What are the signs of a problem?

Book or Enquire Directly at Each Site

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