

# J. Clinton Walker, MD

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*If you have any questions or concerns, call the office.*



## **Carpometacarpal Osteoarthritis**

You have been diagnosed with osteoarthritis in your thumb. Osteoarthritis is a condition where the cartilage covering the ends of your bones wears down over time. This ultimately causes bone on bone friction within a joint resulting in a painful and/or stiff joint. While it is primarily a "wear and tear" process, there are other factors that play a role in degenerative arthritis. These include previous trauma or injury, repetitive stress over long periods of time, or just the aging process. Osteoarthritis in the wrist most commonly affects the joint at the base of the thumb (the thumb carpal-metacarpal joint or CMC joint) where it connects to the wrist.

## **Surgery**

The surgical technique will involve an incision along the base of your thumb. The surgeon will remove a small bone in your hand, the trapezium, and then reconstruct the joint space with a tendon to stabilize the thumb. This procedure is performed under general anesthesia. You will be asleep for the entire procedure. Your surgeon may also recommend a block. Your procedure will take approximately 3 hours- including recovery time. You will also be required to have a driver the day of surgery.

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## **What to expect after surgery**

Depending on your job duties, you may be able to return to work under certain restrictions- provided you are no longer taking narcotic pain medication (You may wean into over the counter Tylenol, Ibuprofen, or Aleve for your symptoms as tolerated). You will need to avoid heavy lifting and submerging your hand in water until after your post-operative appointment with your surgeon. We suggest you speak with your employer regarding job demands to agree on an expected time of return.

Pain medication will be prescribed for post-operative pain relief. You will slowly wean from this medication over time as your symptoms subside. You may also experience some bruising and/or swelling. These symptoms may be alleviated through Ibuprofen or Aleve, elevation, and ice. (Please do not take additional Tylenol if you are taking narcotic pain medication; this already has Tylenol). Your digits will be free to perform normal activities of daily living and it is recommended that you keep your digits moving to prevent swelling after surgery.

You will be expected to keep your temporary splint and bandages clean and dry until your post-operative appointment with your surgeon 7- 10 after surgery. At the time of your post-operative appointment your dressings and post-operative splint will be removed and a cast will be applied. The cast will allow you the use of your fingers, but not the thumb, and will extend to your mid-forearm. You will be in a cast for 6 weeks. You will then return to the office to have your cast removed and will be transitioned into a removable splint and occupational therapy will be initiated. Functional recovery takes approximately 3- 6 months.

Following your hand surgery, it may be difficult to open your medication bottles. If you prefer, you may request NON child-proof bottles from your pharmacist when dropping off prescriptions. However, please consider the risks if you have small children in your home or if any small children may be accessible to these medications.

## **Reasons to call our office**

Your post-operative temporary splint will allow for fluctuating swelling following surgery. However, if the splint feels too tight you may remove the outer wrap and replace this wrap with an ACE wrap that is less tight. This will be removed at your post-operative visit with your surgeon.

Once you are placed into a cast, you will need to monitor your swelling at home. If your cast begins to feel too tight, be sure to elevate above heart level, ice (above and below the cast), and take anti-inflammatories to control your swelling. Contact the office if you have concerns about your cast or wish to discuss alternative anti-inflammatory medication.

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**Please call our office if you experience abnormal drainage (yellow or green), fever over 100°F, chills, increasing redness around the incision site, or side effects from your pain medication such as prolonged nausea.**