

WRIST ARTHRITIS

In general, once the process of arthritis has begun, the natural history is erratic progression of joint deterioration. There is no known treatment which has been shown to reverse, stop or even slow the progression of deterioration.

Treatment goals: relief of pain and maintain function

Nonsurgical treatment options:

- NSAIDs
- Splinting
- Steroid injections
- Physical therapy programs

Surgical management:

- Outpatient surgery, depending on the specific type of surgery about 1 hour in length, a couple of hours total at the surgery center.
- denervation procedures- remove nerves that transmit pain from the arthritis
- scaphoid excision with partial wrist fusion
- full wrist fusion
- proximal row carpectomy
- capitate hemiarthroplasty

Rehab after surgery

Denervation (PIN/AIN)

- anticipate 2 weeks in a brace and then gentle range of motion with a compressive Ace wrap after surgery.
- This has about a 70 to 80% chance of giving relief, it would be rare to have complete absence of pain
- may require further surgery down the road (conversion to fusion or to proximal row carpectomy)

Fusion:

- 2 weeks in a post-operative splint. Wound check after that, if the patient requires a fusion or more extensive surgery then 4 weeks in a cast, and depending on healing, 6 weeks in a removable brace
- second 6 weeks and restrictions of not doing any heavy activity during that time. It often takes patients 6-12 months to fully recover from the more extensive reconstructive procedures.

