

Thumb Arthritis

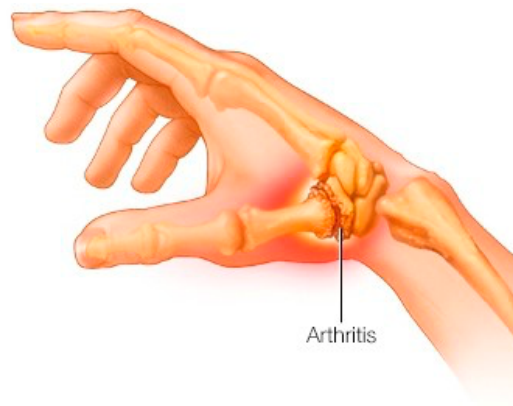
Carpal Metacarpal (CMC/Basilar) Arthritis

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DESCRIPTION:

In a normal joint, cartilage covers the end of the bones and serves as a shock absorber to allow smooth, pain-free movement. In osteoarthritis (OA, or “degenerative arthritis”) the cartilage layer wears out, resulting in direct contact

between the bones and producing pain and deformity. One of the most common joints to develop OA in the hand is the base of the thumb. The thumb basal joint, also called the carpometacarpal (CMC) joint, is a specialized saddle-shaped joint that is formed by a small bone of the wrist (trapezium) and the first bone of the thumb (metacarpal). The saddle shaped joint allows the thumb to have a wide range of motions, including up, down, across the palm, and the ability to pinch.



WHO GETS CMC ARTHRITIS & WHY

Osteoarthritis (OA) at the base of the thumb is more commonly seen in women over the age of 40. The exact cause is unknown, but genetics, previous injuries such as fractures or dislocations, and generalized joint laxity may predispose towards development of this type of arthritis.

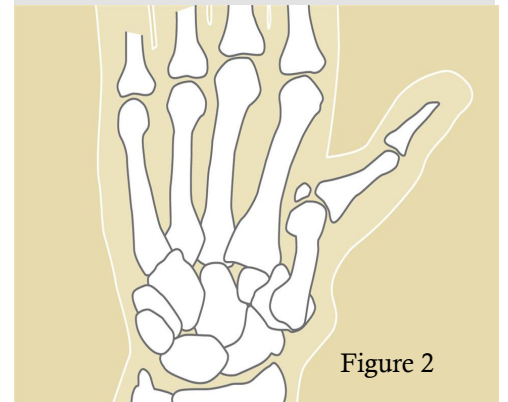


Figure 2

Please visit www.handcare.org for additional information and figures concerning CMC arthritis

SIGNS & SYMPTOMS:

The most common symptom is pain at the base of the thumb. The pain can be aggravated by activities that require pinching, such as opening jars, turning door knobs or keys, and writing. Severity can also progress to pain at rest and pain at night. In more severe cases, progressive destruction and mal-alignment of the joint occurs, and a bump develops at the base of the thumb as the metacarpal moves out of the saddle joint. This shift in the joint can cause limited motion and weakness, making pinch difficult. The next joint above the CMC may compensate by loosening, causing it to bend further back (hyperextension).

DIAGNOSING:

The diagnosis is made by history and physical exam. Pressure and movement such as twisting will produce pain at the joint. A grinding sensation may also be present at the joint. X-rays are used to confirm the diagnosis, although symptom severity often does not correlate with x-ray findings.

Treatment Options for Arthritis Pain

CONSERVATIVE:

Less severe arthritis will usually respond to non-surgical care.

Treatment options to decrease severity of symptoms:

Arthritis medication- pills and creams

- (asperceme/arnica/voltaren)
- Tylenol/ibuprofen

Moist heat/heating pad

Therapy exercises and braces to support the joint

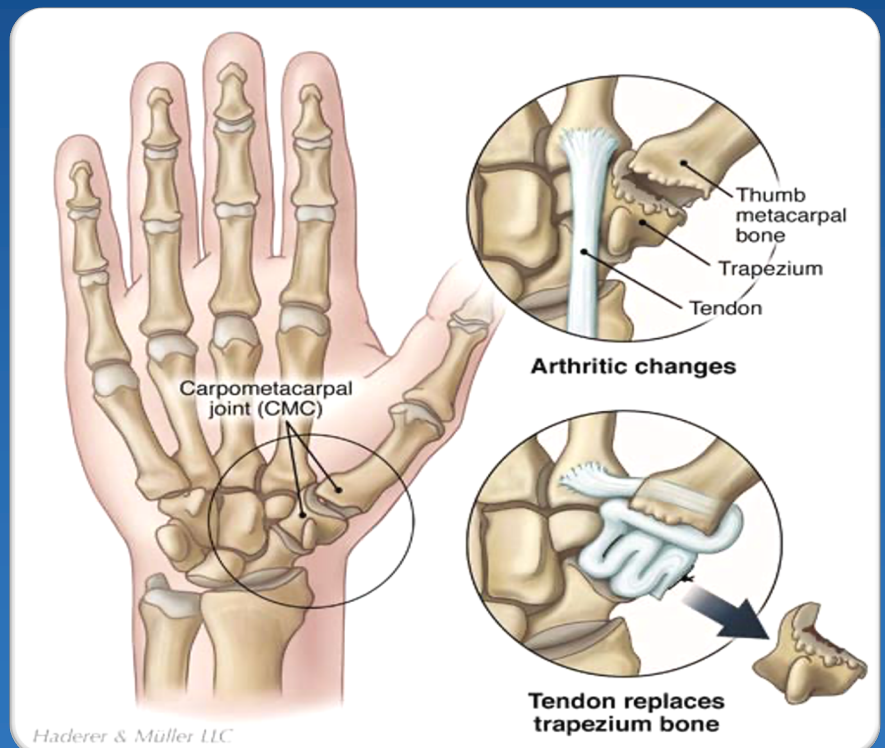
Cortisone injections

SURGICAL:

Patients with advanced disease that is not relieved with non-surgical treatment can consider surgery.

Joint reconstruction (see diagram) has high success rates and low risk of complications and is the most common surgery to treat CMC arthritis

Soon after surgery, you will start therapy and be fitted for a removeable brace that you will wear for about 8 weeks



CMC ARTHROPLASTY SURGERY