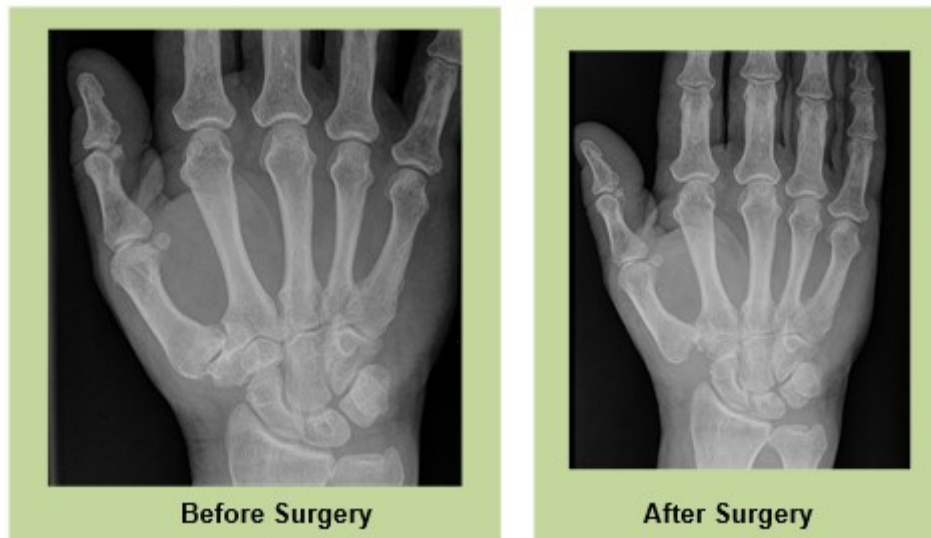


Simple Trapeziectomies (Mr Thangarajah)

Hand Therapy



The Surgery

The trapezium bone sits at the bottom of the thumb to form the 'first CMC joint'. This bone is very prone to wear and tear which can be a painful process and limit hand function.

A trapeziectomy surgery is completed when the pain becomes difficult to manage and the bone is removed. There are different variations of this surgery, each with a different post-surgery rehabilitation plan.

During a simple trapeziectomy surgery the trapezium bone is completely removed. It then takes a period of 6-12 weeks for scar tissue to fill the gap for the thumb to be strong and stable again.

Immediately Following Surgery

- You will be in a bulky dressing made more rigid with plaster along one side
- This will remain in situ for a minimum of 2 weeks

After 2 weeks you may be seen in the hand therapy department and the following rehabilitation will take place at the surgeon's request.

Post-op period	Treatment
2 weeks 1 st treatment	<ul style="list-style-type: none"> • Removal of bulky dressing • Removal sutures / wound care • Fabrication of wrist and thumb splint to be worn at all times (Image A)
3 weeks	<ul style="list-style-type: none"> • Check wound / scar • Scar management if appropriate
4 weeks	<ul style="list-style-type: none"> • Reduce splint so that it no longer includes wrist (image B) • Thumb opposition exercises while supporting thenar eminence • Educate patient on 'strong O' shape versus 'weak D' • Active wrist exercises if indicated • Advise on light use of hand with splint in situ
6-8 weeks	<ul style="list-style-type: none"> • Advise on reducing splint to night and protective use • Gradual increase in activity • Avoid MCP hyperextension • Active thumb exercises all movements • First dorsal interosseous and isometric thumb stabilising exercises • Grip and pinch not assessed before 6 weeks, then done at discretion of treating therapist
8-12 weeks	<ul style="list-style-type: none"> • Graded pinch strengthening using thespange / pegs • Increased functional use of hand • Maximum force not exerted until 12 weeks

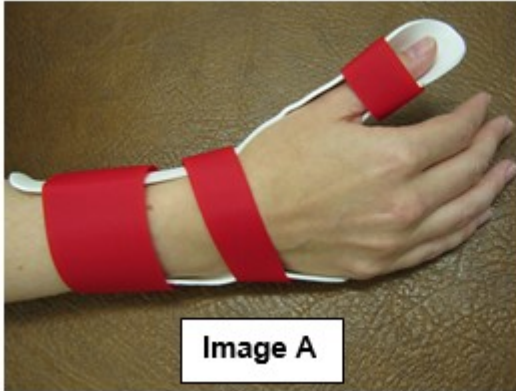


Image A

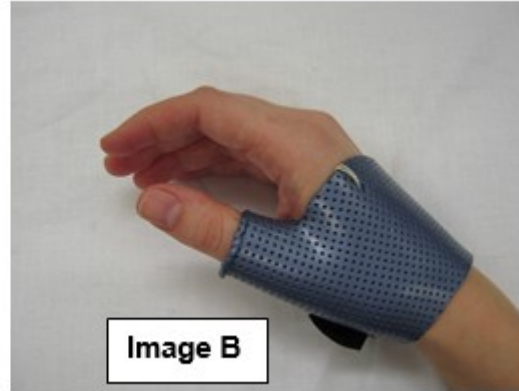


Image B

These guidelines have been created specifically for patients referred by Mr Thangarajah but may be adapted depending on the patient's individual progress.

These guidelines have been produced following the publication of 'Development and implementation of a trapeziectomy rehabilitation protocol'; Hand Therapy 2017, Vol 22(2), 64-72, Henstridge. It has considered old protocols, the evidence presented in this piece of literature and the capacity within the services available to the patient within our trust.

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.



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