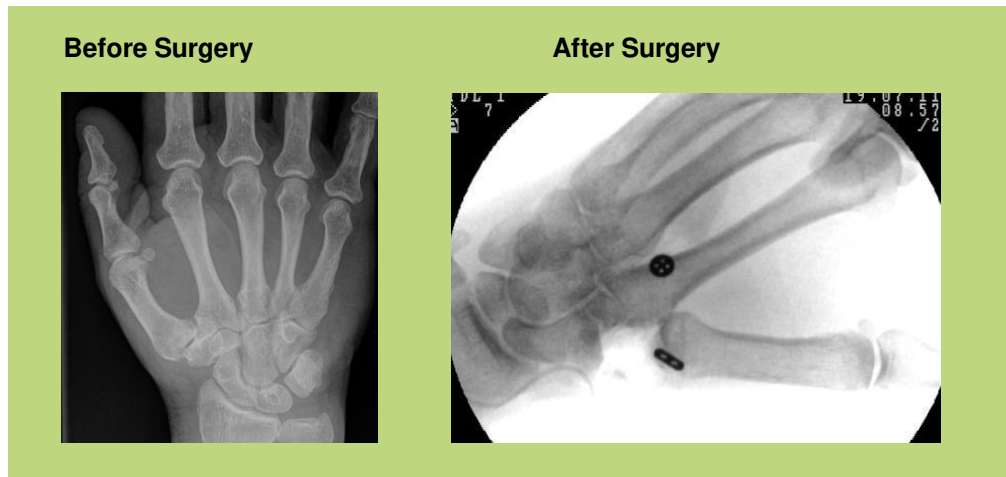


Hand Therapy

Trapeziectomy with mini tight-rope (Prof. Imam)



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 trapeziectomy and mini-tight rope surgery the trapezium bone is completely removed. The thumb is given extra stability by means of a 'mini-tight rope' securing it to the very base of the index finger. Think of this as a very tough internal suture. This allows you to start progressing with your therapy plan a bit sooner than other surgeries where the stability of the thumb is more reliant upon scar tissue forming.

Immediately Following Surgery

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

Two Weeks Following Surgery

You will see the surgeon for:

- Removal of the bulky dressing/plaster
- Check wound which should now be healed
- Check stability

You will see Hand Therapy For:

- Assessment of movement at thumb, wrist, fingers
- Active exercises of thumb (and wrist/fingers if required)

- Assessment of swelling and advise on managing it
- Advise on beginning to use your hand versus continuing to protect the thumb



- Thermoplastic thumb spica splint for constant use (removing for exercises)
- The splint encourages abduction of the thumb, opening up the web space, as shown above
- Monitoring of scar and advise on management if fully healed
- Assessment of sensation if any problems

Three Weeks Following Surgery

You will attend hand therapy for:

- Check splint
- Scar and swelling management
- Check exercises and movement

Four Weeks Following Surgery

You will attend hand therapy for:

- Advised on reducing the splint for light activities during the day but continuing at night and as required for protection and being guided by how hand feels
- Ongoing scar and swelling management
- Progression of home exercises with introduction of gentle strengthening including grip and pinch
- Education on good positioning of thumb (strong 'O' versus weak 'D')

Six Weeks Following Surgery

You will attend hand therapy for:

- Gentle passive stretches if movement remains restricted
- Assessment of pinch and grip strength
- Progression of strengthening
- Ongoing scar and swelling management
- Advise on ceasing use of splint if there are no concerns and progressing activities further (carrying light items and gentle gripping)

You will see Prof Imam for:

- Review of progress post-surgery

6-12 Weeks Following Surgery

Hand therapy input will continue if there is a specific clinical need and goals that haven't yet been achieved. In this scenario your home exercises will be progressed appropriately for you depending on how you are presenting.

The above guidelines have been produced for Prof Imam patients only following this surgery. These are just guidelines and all patients are treated individually depending on their presentation on a case by case basis and as guided by the Consultant.

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