

Thumb (1st CMC) Arthritis



Arthritis is a condition that irritates or destroys a joint. Although there are several types of arthritis, the one that most often affects the joint at the base of the thumb (the basal joint) is osteoarthritis (degenerative or "wear-and-tear" arthritis).

Cause

The joint at the base of the thumb, near the wrist and at the fleshy part of the thumb, enables the thumb to swivel, pivot, and pinch so that you can grip things in your hand. Osteoarthritis occurs when cartilage (a substance that covers the base of the joints) begins to wear away.

Symptoms

- Pain with activities that involve gripping or pinching, such as turning a key, opening a door, or snapping your fingers.
- Swelling and tenderness at the base of the thumb.
- An aching discomfort after prolonged use.
- Loss of strength in gripping or pinching activities.
- An enlarged, "out-of-joint" appearance.
- Development of a bony prominence or bump over the joint.
- Limited motion.

Diagnosis

Your physician will ask you about your symptoms, any prior injury, pain patterns, or activities that aggravate the condition. One of the tests used during the examination involves holding the joint firmly while moving the thumb. If pain or a gritty feeling results, or if a grinding sound (crepitus) can be heard, the bones are rubbing directly against each other. The physical examination may show tenderness or swelling at the base of the thumb.

An X-ray may show deterioration of the joint as well as any bone spurs or calcium deposits that have developed.

Many people with arthritis at the base of the thumb also have symptoms of carpal tunnel syndrome, so your physician may check for that as well.

Nonsurgical Treatment

In its early stages, arthritis at the base of the thumb will respond to nonsurgical treatment:

- Ice the joint for five to fifteen minutes several times a day
- Take an anti-inflammatory medication such as aspirin or ibuprofen to help reduce inflammation and swelling
- A supportive splint to limit the movement of the thumb, and allow the joint to rest and heal. The splint may protect both the wrist and the thumb. It may be worn overnight or intermittently during the day.

Because arthritis is a progressive, degenerative disease, the condition may worsen over time. The next phase in treatment involves a steroid solution injection into the joint. This will usually provide relief for several months. However, these injections cannot be repeated indefinitely.

Surgical Treatment

When nonsurgical treatment is no longer effective, surgery is an option. The operation can be performed on an outpatient basis, and several different procedures can be used.

One option involves fusing the bones of the joint together. This, however, will limit movement.

Another option is to remove part of the joint and reconstruct it using either a tendon graft or an artificial substance.

You and your physician will discuss the options and select the one that is best for you.

Rehabilitation

- Casting for 2 weeks, removable splint for 4 additional weeks
- Physical therapy for strength and motion
- Full recovery may take 6+ months
- Most patients resume normal activities and are quite satisfied after surgical intervention

Adapted from American Academy of Orthopaedic Surgeons. For more information, see orthoinfo.aaos.org

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