Orthopaedic Connection

Make My Thumb Stop Hurting

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Transforming patient information into patient understanding.

Last time I tried to explain that the cause of thumb pain is often overlooked. In addition I talked about how it is diagnosed. All that is fine, but now I plan to tell you how it is treated.

If your thumb is too painful to work right, you have lost up to 50% of your hand function. So here we go.

Treatment

Notice I didn’t say surgical treatment. That of course at times is what is needed, but there are other things to do first. I have found that my patients appreciate this approach.

Treatment depends on the severity of the arthritis in the base of the thumb.

• Anti-inflammatory medication. For example Advil or similar or even a prescription medication.
• A brace is available to steady the thumb, but my patients get tired of wearing it and can’t wear it if they get their hands wet or dirty.
• Physical/Occupational Therapy might help, but it can’t get rid of arthritis changes. Often worth a try, though.
• Injection. Not just “a shot”. It has to be given into the joint itself. I have a small TV x-ray unit in the office that allows me to see exactly where I am injecting the Celestone (steroid). The joint is so small this is the only way you can get it in the joint. Many patients can get sustained relief by this injection technique.

Surgical Treatment

There have been many operations tried over the years to treat this problem of thumb arthritis. I have used most of them. There is one that I have settled on as best for my patients. It is done under general anesthesia (so relax I won’t hurt you!). Part of the arthritic joint is removed and a portion of ligament tissue from the
Michigan Tissue Bank is inserted as a spacer which keeps the bones from rubbing together. Your own tissues heal around it to keep it in place. That’s it.

**Afterwards**

Most people can go home later the same day with a pain pill to take and elevation of the arm. A cast is worn for 4 – 6 weeks to allow early healing of tissue. After the cast a removable splint may be worn for a few weeks. It can take a few months to have more complete use of the hand. Some patients require Occupation Therapy, but most do not. I hope this has given you good information of a common problem often overlooked.

**Factoid**

Knee replacement increases mobility and function in older patients. Besides hopefully relieving most of the patient’s pain, there are many other benefits. Recent studies have shown great increases in mobility and motor skills and a marked benefit in daily activities such as bathing and dressing. It’s a big operation, but the benefit is huge.

**Gratiot County Herald Archive and Office Website**

You reach the Archive through the new, improved website, [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com). It exists for you! A great collection of information at the click of a mouse.

Our goal is simple – To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush