

# Hand therapy after trapeziectomy

4 – 8 weeks after surgery (1 of 7)

For 12 weeks after your surgery you will see a hand therapist who will give you an exercise programme to improve your wrist and thumb range of movement, enabling you to return to full function. In most cases this requires no more than three therapy sessions.

Your rehabilitation will cover 2 main stages, which are determined by the rate of healing.

- **Stage 1.** 4 – 8 weeks after surgery: working for a reduction in swelling and regaining range of movement in your wrist and thumb.
- **Stage 2.** 8 – 12 weeks after surgery: working for strength and return to function.

Although your rehabilitation should be completed by 12 weeks, most people do not begin to get the full benefits of this operation until 6 months after surgery. This is normal and we expect your hand and thumb to continue to improve, for up to a year.

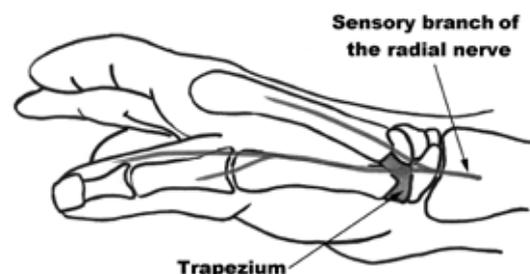
This leaflet covers the first stage of your rehabilitation (i.e. from 4 to 8 weeks) and tells you of the aims of hand therapy during this period.

## 1. Managing pain

Pain is common after this surgery but will gradually settle. However, now you are out of your cast and starting to use your thumb pain may increase. This is normal and you may need to take pain killers such as regular paracetamol. Your pain may not fully resolve until 6-12 months after surgery. However, if after activity your hand is particularly sore, rest it and use your splint more, until the pain settles.

If you have ongoing problems with both pain and swelling contact your hand therapist. This is especially important if your hand looks red and mottled in appearance and you notice any increased hair growth such as over the back of your thumb. If this is the case, do not delay in seeking advice.

During surgery a small nerve (the sensory branch of the radial nerve), is moved gently to one side to enable the surgeon to remove the trapezium bone. Following surgery most patients report some degree of pain, pins and needles, hypersensitivity or numbness in the thumb and/or the back of the hand.



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: [customer care@salisbury.nhs.uk](mailto:customer care@salisbury.nhs.uk)

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: [www.salisbury.nhs.uk/FriendsFamily](http://www.salisbury.nhs.uk/FriendsFamily) or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

This is expected and no permanent damage will have been done to the nerve. These abnormal feelings will reduce and settle down within 3 months. However, don't be surprised if you get an 'electric' shooting pain through your arm and hand – which is mostly likely to happen when you are relaxing. This is a good sign that the nerve is recovering and is nothing to worry about.

Once you have had your surgical dressings removed, you will continue to wear a light-weight splint to support the base of your thumb. Over the next 4 weeks you should gradually wean out of your splint, as pain allows, whilst working on light activities (see below). Think of using your splint in terms of "slippers or wellingtons". Your splint can be worn if your thumb has become tired or painful (slippers) and should be worn in situations where you need to give your thumb some protection such as going out into crowds, supermarket shopping (wellingtons). For the first two weeks you should wear your splint at night to protect your thumb from accidentally catching in the bedclothes.

## 2. Reducing swelling

It is normal to have some swelling in the thumb, hand and wrist following surgery. You may also find your hand swells if you have been using it too much, too soon. This is to be expected. However, if your hand does become swollen then you need to reduce the swelling as soon as possible, as it hinders the easy movement of your thumb and hand.

It helps to think of the swelling as a drop of water on your finger tip. If you hold your hand down, the water drop stays at your finger tip. If you lift your hand in the air, the drop runs down your arm into your arm pit and body - this is what you are trying to achieve, through exercise. You can do this by one, or both, of the following 'pumping' exercises:

a) Move your arm up and down, lifting your hand up towards the ceiling, for example 10 times every hour. This exercise also helps to get your shoulder and elbow moving well.



b) Spread fingers and thumb apart, then make a fist – do this 10 times with your hand raised as high as possible. Complete this routine four times every hour for the first few days and then as necessary to keep your hand swelling under control.



If your hand looks swollen, you need to do these exercises more often. If your hand is looking a similar size to the other side, you can reduce the frequency of the exercise.

### 3. Improving the scar

You will have a small scar on the base of your thumb and wrist. For most people the scar will already be soft and supple. However, scar tissue can become lumpy or hard and can 'stick' to other surrounding soft tissues which in turn restricts movement of your thumb. Once your scar has completely healed you need to begin gentle massage. Massage the scar using cream, such as E45, in firm small circular movements to improve the appearance and suppleness of the scar. You should plan to massage your scar for 2 – 3 minutes, 3 times a day. Don't overdo massage – if the skin starts to look red and feel sore you are probably doing too much – ease off!

### 4. Increasing movement

Your thumb and wrist will feel stiff after being in a cast for 4 weeks. You now need to regain active movements in your wrist, thumb and fingers. Exercises should be done gently not forced. Through regular gentle exercise your movement will slowly improve over the next few weeks. We want you to concentrate on the following exercises, little and often. Aim for 10 repetitions of each exercise, 3 - 4 times a day. You will need to make some dedicated time to complete your hand therapy e.g. a half hour session after breakfast, lunch, dinner and in the evening.

#### Wrist – extension

Rest your hand and forearm on a table and keep your fingers relaxed. Gently support your forearm to stop it moving – this will make sure that all the movement comes from your wrist.

Lift your hand up off the table – your fingers should naturally curl. Relax your hand back on to the table top and repeat the exercise.



#### Wrist – flexion

Rest your elbow on a table, with your hand held upright – fingers pointing to the ceiling. Bend your hand down, from the wrist, whilst letting your fingers relax. Your fingers should naturally straighten. Straighten your hand back up to the starting position and repeat the exercise.

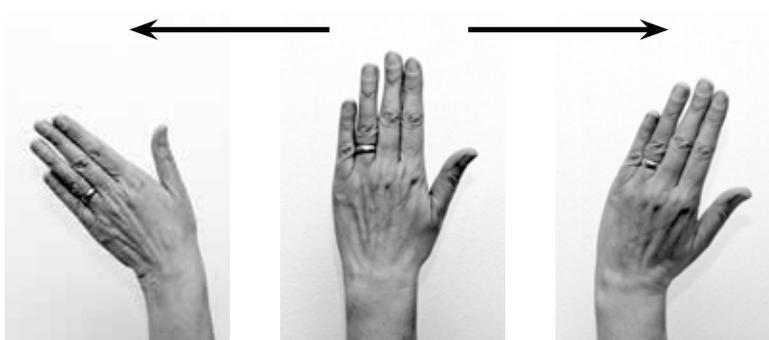


#### Wrist – side to side

Rest your hand on the table. Gently support your forearm to stop it moving. This will ensure that all the movement comes from your wrist.

Slide your hand towards your little finger and then back towards your thumb.

You can expect to find this exercise a little uncomfortable around the base of your thumb, as it is moving the area where you have had your surgery – this is normal. In the early days it can help to perform these exercises by sliding on a piece of paper to reduce friction.



You can also perform this exercise with your elbow resting on the table and your hand in the air, However, you must be sure that your wrist – and not your elbow – is making the movement.

**Thumb – extension (straight) and flexion (bend)**

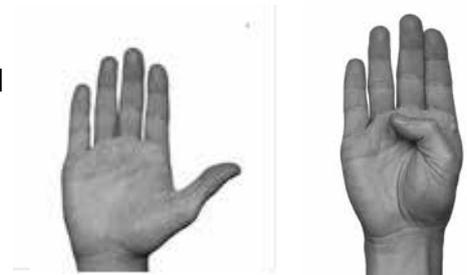
Either rest your hand and forearm on a table or rest your elbow on a table with your hand held in the air.

Start with your wrist and fingers straight.

Move your thumb out away from your hand (extension). Hold for a few seconds.

Gently stretch your thumb across the palm of your hand towards the base of your little finger (flexion).

Hold for a few seconds and then repeat the sequence.



This movement can be applied to gathering up a soft piece of material – such as a nylon scarf. Stretch your thumb out and slide the material back into your hand, until you have gathered up as much of the scarf as possible.

**Small thumb joints – extension and flexion**

Start with your wrist and fingers straight and pointing up.

Use your un-operated hand to block the movement at the base of your thumb to achieve the bend at the middle and top thumb joints above – one at a time.



The photograph shows this exercise with the top thumb joint.

**Thumb – ‘Picking up a glass’**

Rest the side of your hand on a table with your thumb on top, in line with your index finger.

Open

your thumb out – imagine you are going to pick up a glass.

Close your thumb back up to your palm and repeat the movement.



### Thumb – ‘Painting circles’



The exercises above can be advanced to make large circular movements with your thumb. It sometimes helps to imagine that you have a paint brush strapped to your thumb and are drawing big circles with it. The movement should come from the very bottom of your thumb – where you have had the surgery – you should see the skin wrinkling around this point, which shows the base of the thumb is moving. Circle the movement in both a clockwise and anti-clockwise direction.

This exercise can be applied to holding a small round object, making sure that you fit it well into the web of your thumb. Objects such as a small pastry cutter, cotton reel or bottle top are effective. Hold the object for a few seconds and gradually aim to increase the size of the object, to gently open up your web space, back to normal. Check this against the other hand, if possible.



However, it is very important that the base of your thumb is achieving this movement. Do not do this exercise if it pushes your middle thumb joint into an over-straightened position.



### Thumb – pulp to pulp pinch

Rest your elbow on the table with your hand held in the air.

Touch the tip (pulp) of your thumb to the tip of each finger in turn, making an ‘O’ shape.

When you can make a pinch grip to the tip of your little finger, try to slide your thumb down the little finger, as far as you can, into your palm.



You can apply this exercise to picking up small light objects such as textured pasta, dried beans, beads, buttons, marbles. Transfer the objects from one cereal bowl to another – picking up the objects using your thumb and each finger in turn. Start with objects that have some texture (e.g. fusilli pasta or

large buttons) and then move on smoother objects such as beads, that will be harder to grasp. Practice picking up these objects and gathering them into the palm of your hand. Count how many you can hold.

### Thumb – lifting up off a table

Start with your hand flat on the table, with your palm facing down. This in itself might be difficult to achieve. You are aiming to get the knuckle of your index finger to touch the table.



Lift your thumb up towards the ceiling, making sure that the rest of your hand stays flat on the table – do not rotate your hand.

Hold for a few seconds and then repeat.

If you find it difficult to get your hand flat on the table, rest your hand on the edge of a table. Let your thumb drop over the edge and then lift it up towards the ceiling, as far as you can. This is a difficult exercise following a trapeziectomy; don't worry if you cannot manage it easily. Exercise as pain allows.

### Exercises for thumb dexterity

As well as going through specific exercises for range of movement, you need to do exercises that help you to regain dexterity and normal use of your thumb. Such as the following:

- Threading washers on to cord, tying knots in the cord, as you go. Undo the knots and begin again
- Threading a nut on to a screw
- Shuffling playing cards, turning cards over, try card games such as pairs or solitaire
- Jigsaws
- Solitaire peg games
- Children's games with dice and counters such as snakes and ladders
- Hold a silk scarf up in the air and then gather it into your hand.



## 5. Return to function

Over the next four weeks you can return to light everyday tasks. At this stage you must not do tasks that involve any strong pinch grip, heavy lifting, pushing or pulling. Continue to be guided by pain. If your thumb is sore following an activity, use your splint to let your thumb rest until the pain is settled. Gradually wean out of your splint for these tasks, over the next four weeks. However, if you have to do anything heavy, use your splint. Suitable activities around the house at this stage include:

- Washing yourself, dressing, cleaning your teeth, easy buttons and zips
- Cutting meat with sharp steak knife, eating with a knife and fork
- Holding a mug with 2 hands
- Light dusting and cleaning
- Light cooking such as buttering bread with a soft spread, sandwich making, holding carrots or potatoes for peeling, light peeling tasks
- Light washing up – start with the cutlery
- Hand writing – using a thick pen, if possible one with a rubber grip section
- Using computer keyboard, i-pad, phone
- Light painting such as painting by numbers – not decorating the house!

- Playing light games such as draughts, dominoes, card games
- Crafts – light glueing and sticking, card making, cross stitch, light sewing, light scissor work
- Towards 7 – 8 weeks you can begin some baking such as making pastry or scones (with soft margarine).

## Return to driving

Generally we do not recommend return to driving until you are about 8 weeks post surgery. However, this does depend on which hand has had the surgery and the design of your car. For example, it will be at least 8 weeks until your left thumb is likely to be strong enough to manage a hand brake. Cars that have power assisted steering and automatic hand brakes will be easier to use than those that do not. You are advised to let your insurance company know that you have had surgery.

## Return to work

This will depend on what type of work you do; people who have light work will be able to return to work earlier than those with a heavy manual job. Generally we recommend return to work between 8 – 12 weeks, depending on the physical demand on your thumb and hand. Please discuss this with your therapist.

If you have any persistent problems with:

- Swelling of your hand, or
- Your hand turns different shades of red or blue, or
- Pain - especially a burning type of pain, or
- Pins and needles in the palm side of your thumb, index and middle fingers.....

....please contact your therapist to get a review as soon as possible.

Name of Therapist .....

Telephone number .....

**Hand Therapy - 01722 345530**

**Wessex Rehabilitation Centre 01722 336262 ext 2370**