

Orthopaedic surgeons see epidemic of thumb arthritis

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(Medical Xpress) -- As baby boomers age, orthopaedic surgeons are seeing more and more patients, especially women, who suffer from debilitating arthritis of the thumb.

"It's a real epidemic," said [hand](#) surgeon Dr. Terry Light, chairman of the Department of Orthopaedic Surgery and Rehabilitation of Loyola University Medical Center.

Arthritis patient Lori Giacone of Indian Head Park, Ill., said that when she tried to do simple tasks such as pumping gas or turning a car key, she would feel a shooting [pain](#) "that almost took my breath away."

Light performed surgery to relieve the pain, first on her right hand and, five years later, on her left. Now, she is virtually pain free.

Patients with less severe cases can benefit from more conservative treatments, including splints, hand therapy and [cortisone](#) shots, Light said.

The thumb has three joints. Arthritis usually occurs in the carpo-metacarpal joint at the base of the thumb where it meets the wrist. The saddle-shaped joint allows the thumb to move in three planes. "The thumb is critical to everything we do," Light said.

Arthritis develops when ligaments connecting the thumb to the wrist stretch out. Because the joint no longer fits snugly, the smooth cartilage lining the surface of the joint wears away, leading to inflammation and pain.

Thumb arthritis makes it painful to do many routine functions, such as writing, turning door knobs, using scissors, unscrewing jar tops, gardening and racket sports. As arthritis progresses, the hand becomes less useful and the pain becomes constant.

Light said the first-line treatment is a custom-made splint that restricts movement, while still enabling the patient to eat and write. Anti-inflammatory cream, warm baths, hand therapy and exercises also can help. If those treatments do not provide relief, the next treatment is a cortisone injection to diminish [joint inflammation](#). But repeated injections can accelerate cartilage destruction, so the injections must be spaced out.

Surgery is the final option. The surgeon removes part or all of the trapezium wrist bone in the part of the wrist that meets the thumb. This reduces the amount of surface for the thumb to rub against. "The goal is to relieve the pain," Light said.

Giacone said that before surgery, her hand was almost useless because she could not move her thumb without excruciating pain. Now, each [thumb](#) has about 90 percent of the function that it had prior to being disabled by [arthritis](#), she said.

The only pain she feels now is a twinge on damp or cold days. "After surgery, the difference was like night and day," she said.

Provided by Loyola University Health System

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