

POST-OPERATIVE ADVICE FOR THUMB/CARPAL FUSION

Your hand has been placed in a dressing/plaster that holds the wrist and thumb in the optimum position for comfort and to protect the operation site. The bones themselves are held with two wires, which are often left sticking out of the skin but tucked away in the dressing.

Hand elevation and light use is important to prevent swelling and stiffness of the fingers. You may have been discharged with a sling. This is only necessary if you have received a nerve block and/or for travelling home. The sling should then be used sparingly and removed regularly to prevent shoulder and elbow stiffness. A sling is not necessary at night.

The fingers and thumb-tip should be moved and used. Try to use the hand for normal light tasks when it is fine for the hand to be lowered. However, remember not to walk with your hand dangling, or to sit with your hand held in your lap, particularly in early weeks after your operation.

Two weeks after the operation, your dressing/plaster will be changed to a lighter splint. If the wound is satisfactory, it will be left open. However, it is advisable to place a piece of gauze between wound, wires and splint to prevent sweating, friction and skin maceration, which encourage infection. There obviously will be some swelling and bruising. Look out for any redness or tenderness around the wound or wires that might indicate an infection. Do not apply antiseptic but please contact the hospital if you have any worries.

Your stitches will be dissolving by about two weeks after surgery. During the period of healing and wire exposure, avoid contact with livestock and agricultural environments, including gardening. Gloves are no protection against the risk of infection.

You can remove your splint each day to wash/bathe the wound/wire sites or to let the air at the wound when seated quietly. Wounds and the surrounding skin can become dry and flaky. If this occurs, briefly immerse the whole hand in water to which a small quantity of baby-oil has been added. Commercial moisturisers are best avoided until wounds have healed as they can cause irritation.

You will need to wear your splint virtually continuously for at least six weeks after the operation. The bones heal together over a period of weeks; the joint gradually becoming stronger similar to glue setting. The fusion must be kept protected from knocks and stresses until x-rays show that the bone-ends are joining together. This usually takes about 6 weeks at which stage the K-wires are removed in clinic. The fusion will not be really "solid" and ready for heavy use until at least 12 weeks at the earliest and some splinting will still be needed until this time.

Recovery of power after these operations is very slow. You will not be able to use the hand heavily for at least three months from surgery. A return to driving requires you to have regained full finger movements and to have sufficient power to control the vehicle. Timing of your return to work is variable according to your occupation and requires some judgement.