

## Thumb CMC (carpal-metacarpal) Joint Osteoarthritis and CMC Excisional Arthroplasty with Fascia Lata Graft

Clare K. McCarthy, M.D.

### Why is it performed?

This surgery is recommended if you have osteoarthritis at the carpal-metacarpal (CMC), or basal, joint at the base of your thumb. Osteoarthritis at that location can cause pain, joint instability, and a weak pinch. This surgery removes the arthritis at that joint, improves stability, and results in a functional pinch.

### What does the surgery involve?

The surgery involves two main components—1) creating a sling at the base of the thumb and 2) removing the arthritic bone and replacing it with a soft-tissue graft. The sling is created by cutting one of the “slips,” or branches, of the APL thumb tendon. The slip is then anchored to the FCR tendon in the wrist, wrapped around the remaining APL slips, and stitched to itself. This part of the procedure maintains your thumb length.

The arthritic bone that is removed is the trapezium. It is one of the wrist (carpal) bones and forms the CMC joint at the base of the thumb. Once the trapezium is removed, a soft-tissue graft from a cadaver is used to fill the space where the bone was. The fascia lata graft comes from the side of the leg of someone who has passed away. It is freeze-dried and irradiated so that infection cannot be passed to the graft recipient. There is no chance that your body will reject the graft.

During surgery, the graft is prepared for placement. The graft is a rectangle and as thick as an index card. It is rolled up like a newspaper, folded in half, and sutured together and to the sling so that it stays in place.

### What kind of anesthesia is used?

Typically a nerve block is used for this surgery. This kind of anesthesia numbs your arm for 12 to 18 hours so that narcotic pain medication is not needed during surgery. You will be prescribed narcotic pain medication in order to control your pain at home once the block has lost its effect.

### How long is the recovery process?

The recovery process is approximately 3 months long. For the first 10 to 14 days following surgery, you are in a surgical dressing that must remain clean and dry. When you come to clinic for your first post-op visit 10 to 14 days after surgery, you will be seen by my physician assistant Claire Joubert, PA-C. She will look at your incision, remove your sutures, fit you with a removable splint, and teach you the wrist and thumb exercises you will be doing for 4 weeks. When you return to clinic for your second post-op visit approximately 6 weeks after surgery, you will begin pinching and strengthening your thumb. Normal use of your thumb will be recommended as tolerated.

