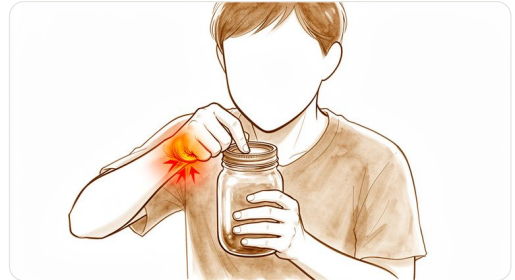


# Basal Thumb Arthritis

Arthritis at the base of the thumb (the carpometacarpal joint).

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## What you're feeling

Basal thumb arthritis is a common condition that affects the joint at the base of your thumb. This wear-and-tear arthritis develops as part of normal aging. You may notice that the pain is not just on the surface but feels deep inside the joint. Early in the disease, you might find it harder to grip objects firmly. Simple tasks like turning a key or opening a jar can feel difficult because your grip strength weakens.

The pain often flares up after you have been using your hand for a while. You might feel achy and stiff when you first wake up in the morning. This stiffness usually eases as you move your hand, but it can return if you do repetitive motions. Some people experience pain at night, which can make it hard to fall asleep or stay asleep. Sleeping on the side that hurts can put direct pressure on the inflamed joint, worsening the discomfort.

Daily activities become more challenging as the condition progresses. You may struggle with fine motor skills, such as buttoning a shirt or tucking in a blouse. Reaching behind your back to fasten a bra can be particularly painful. You might also find that holding a phone or a cup of coffee causes sharp pain at the thumb base. This is because these actions require a strong, stable grip that the arthritic joint can no longer provide comfortably.

Chronic pain and inflammation are common features of this condition. You might feel a constant low-grade ache even when you are resting. The joint may feel warm or swollen to the touch. While the pain can be frustrating, it is a clear signal from your body that the joint is under stress. Your surgeon will listen to your history and examine your hand to confirm the diagnosis. Understanding these symptoms helps explain why certain movements hurt and why rest or specific supports might provide relief.

## What's actually happening

Basal thumb arthritis is a common, progressive wear-and-tear condition. It affects the joint at the base of your thumb, where it meets your wrist. Over time, the smooth cartilage that cushions the bone ends wears away. This

leads to chronic pain and inflammation. You may notice a reduction in your ability to make a firm grip. This happens early in the disease, even before X-rays show significant damage.

The joint relies on precise movement and stability. Ligaments and tendons act like ropes to hold the bones in place. When the joint structure changes, these stabilizers struggle. The bones may shift or migrate upward. This misalignment alters how the joint moves during pinching or grasping. The resulting friction causes further damage to the joint surface. Your surgeon can diagnose this through a simple history and physical exam.

Surgery aims to restore the anatomy and biomechanics of this joint. Procedures like trapeziectomy remove the damaged bone to relieve pain. Other options use tendons or synthetic spacers to stabilize the joint. While these treatments improve function and health, they do not fully replicate the motion of a healthy joint. Some procedures may allow the bone to shift slightly over time, but this often does not affect your daily function. The goal is to reduce pain and restore your ability to use your hand effectively.

## What we can do about it

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We start with non-operative care, which is effective for early stages of wear-and-tear arthritis in the base of your thumb. Your surgeon may recommend self-management strategies and physiotherapy to help you maintain movement and strength. These conservative measures aim to reduce pain and improve function without surgery. You should give these methods a fair trial before considering more invasive options. For many patients, this approach is sufficient to manage symptoms effectively.

If simple measures do not provide enough relief, your surgeon may discuss medical management. This can include pain medication and anti-inflammatory drugs to help control discomfort. Injections are another option. Cortisone injections can reduce inflammation and pain for a limited time. Hyaluronic acid injections may help lubricate the joint, though effects vary. Platelet-rich plasma (PRP) injections use your own blood components to promote healing, but evidence on their long-term benefit is still developing. Your surgeon will advise on which injection, if any, is suitable for your specific condition and how long the relief might last.

Surgery is reserved for cases where conservative measures have failed to provide adequate relief. The goal of surgery is to remove the source of pain and restore function. One common procedure is trapeziectomy, where the worn bone is removed. This often yields very positive long-term clinical outcomes. Other options include joint replacement or fusion, depending on your individual needs. While most patients experience significant improvement, it is important to know that despite many treatment options, a constant proportion of patients remain unhappy or symptomatic after surgery. Your surgeon will discuss the risks, benefits, and expected recovery time to help you decide if surgery is the right step for you.

## What to expect

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Basal thumb arthritis is a common condition that typically worsens over time. It is a progressive disease, meaning the wear-and-tear changes in your joint tend to increase rather than settle on their own. You will likely notice that symptoms persist and may gradually become more bothersome as the condition advances.

If you choose to manage this with non-surgical options like hand therapy, your journey to surgery may be longer. However, evidence shows that patients who do not undergo therapy often reach the point of needing surgery sooner. For those in the earlier stages of the disease, less invasive treatments such as joint washing or nerve calming procedures can offer relief. These approaches have a low rate of complications and short recovery times, serving as a gentle alternative to more major surgery.

When surgery is the right path, the long-term outlook is very positive. Most patients achieve excellent results that improve their daily function and reduce pain. Your surgeon will discuss the best technique for you, whether it involves removing the worn bone, using a spacer, or replacing the joint. Regardless of the specific method chosen, you can expect significant improvements in your health and quality of life.

It is important to know that some changes may appear on X-rays over time, such as slight shifting of the joint components. However, these radiographic changes do not necessarily mean your outcome will be poor. Many patients maintain favorable strength and satisfaction for many years. Even if a previous procedure needs revision, there are effective options available that yield high satisfaction rates.

While complications are possible, serious issues are relatively uncommon with modern techniques. Some specific older implants are no longer used due to high complication rates, so your surgeon will select materials with a proven safety record. You should also be aware that factors like smoking or previous hand surgery might influence how the condition progresses, but these do not prevent successful treatment. Overall, with appropriate care, you can expect to regain the use of your thumb and return to your normal activities with reduced pain.

## When to see someone

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Basal thumb arthritis is a common, progressive condition. You should see your GP if you notice persistent pain that does not improve with rest. Ask for a specialist review if you experience weakness or instability in your thumb. Symptoms such as locking or giving way also warrant a check-up. Seek care if your symptoms interfere with sleep or work. A sudden worsening of pain is another clear sign to act. While wear-and-tear changes are part of aging, functionally limiting pain is less common. Your surgeon can diagnose this through a simple history and examination. Early detection helps manage the disease before it significantly reduces your grip strength.