TRAPEZIECTOMY AND SLING REHABILITATION

Patient Information



Recovery and rehabilitation after surgery

Structured Rehab Program: Post-Trapeziectomy & Sling Surgery

Overview:

This program is designed for patients recovering from trapeziectomy and sling (ligament reconstruction) surgery. It emphasises self-directed exercises and scar management to optimise recovery, restore function, and minimise complications. The speed of recovery varies from person to person and in some people recovery from this operation can be a slow gradual improvement over 6 months.

Phase 1: Protection & Early Mobility (Weeks 0-2)

Goals:

- Protect surgical site
- Control swelling
- Maintain mobility in non-immobilized joints

• Precautions:

- O You will be wearing a bulky bandage keep it dry.
- No forceful thumb use or lifting

Self-Directed Exercises:

- O Shoulder, elbow, and finger movement:
 - Shoulder circles, elbow bends, and gentle finger flexion/extension including the tip of the thumb
 - 10 reps, 3-4 times daily

O Edema control:

- Elevate hand above heart
- Gentle fist opening/closing

Pain control

o take simple painkillers as and when needed (Paracetamol, Ibuprofen)

Phase 2: Gentle Mobilization (Weeks 2-6) - See the hand exercises information sheet as well

Goals:

- O Restore thumb and wrist mobility
- Begin gentle strengthening
- Initiate scar management

• Precautions:

- O Your bandage can come off, your suture can be removed and you will be given a removable splint to support the thumb which you will take off for exercises in the next 2 weeks and then wean yourself off over the following 2-4 weeks
- Avoid heavy lifting or forceful pinching

Self-Directed Exercises:

- O Thumb mobility:
 - Thumb opposition (touch thumb to each fingertip)

- Thumb abduction/adduction (move thumb away/toward palm)
- 10 reps, 3 times daily

Wrist mobility:

- Gentle wrist flexion/extension and side-to-side movement
- 10 reps, 3 times daily

Light functional use:

■ Picking up light objects (e.g., paper, coins)

Scar Management: see also the scar management information sheet for more a detailed plan

- Once incision is healed, begin gentle scar massage (circular motions with unscented lotion or vitamin E oil, or silicone scar gel 2-3 times daily)
- Use cold to help with swelling
- O Pinch the area of the scar to help separate tissues to help the skin become mobile

Phase 3: Strengthening & Functional Use (Weeks 6-12)

Goals:

- Improve strength and dexterity
- Increase functional use of hand

• Precautions:

O Gradually increase resistance; avoid pain

Self-Directed Exercises:

Strengthening:

- Isometric thumb pinch (press thumb against each finger, hold 5 seconds, repeat 10x)
- Rubber band exercises (open fingers and thumb against resistance)
- Therapy putty exercises (squeeze and pinch putty)

Functional tasks:

■ Buttoning, writing, opening jars (as tolerated)

Scar Management:

- O Continue scar massage and silicone gel as needed
- Protect scar from sun exposure
- Most people can return to driving and light work at about 6 weeks, for those that perform heavier, gripping tasks it may take longer.

Phase 4: Advanced Strengthening & Return to Activity (Weeks 12+)

Goals:

- O Return to full function
- O Prevent stiffness and maintain gains

Self-Directed Exercises:

Progressive strengthening:

- Increase resistance with putty, hand grippers, or light weights
- Pinch and grip exercises with increasing difficulty

Fine motor skills:

■ Manipulate small objects (coins, buttons, beads)

Scar Management:

O Continue as needed for sensitivity or tightness

General Tips:

- Perform exercises 2-3 times daily unless otherwise instructed
- Stop any exercise that causes sharp pain or swelling
- Monitor for signs of infection (redness, heat, discharge)
- Follow up with your healthcare provider or hand therapist as scheduled

Note:

This program is a general guideline. Always follow your surgeon or therapist's specific instructions and adapt exercises based on your comfort and progress.