

Pre/Post-Operative Information – Thumb UCL Repair/Reconstruction

What to expect during surgery:

Dr. Holt will meet you on the day of surgery and review the plan. You will then be taken back to the operating room where your hand will be cleaned and draped in preparation for surgery. Most frequently the surgery is performed under a combination of light sedation and local anesthesia. A small incision will be made along the inside of the thumb (where the thumb meets your hand). The ligament will be evaluated and repaired directly if possible. Repair is performed by reattaching the ligament to the bone in your thumb from where it inserted. If the ligament is not amenable to repair (as in chronic cases), it may need to be reconstructed. This generally involves using a small tendon from your wrist and transferring to the inside of your thumb to replicate the original ligament which was torn.

Pain Control:

Start with simple, but effective pain relief strategies such as ice and elevation. Especially for the first 2 - 3 days, attempt to keep your hand above your heart as much as possible. This will significantly limit pain and swelling. Next, try over the counter pain medications such as Tylenol and/or ibuprofen. Most patients tolerate these medications well. Take them food, and make sure to check your allergies and/or other medications and medical issues to ensure it is safe to take them. Most patients use little or no narcotic medication after this surgery, but Dr. Holt will provide a small prescription of narcotics if needed. Take them as directed and only as needed.

Dressing/Bandage:

Keep your dressing on until you follow up with Dr. Holt. During that period, keep the dressing and incision clean and dry. Use a plastic bag or cover during showers/hygiene.

Activity:

You may use your hands immediately for light activities of daily living such as feeding yourself, dressing, and using a phone and/or computer. You should avoid lifting/pushing/pulling more than 1 pound and/or the use of power tools and highly repetitive activities. Your thumb should immobile and protected with the splint placed at the time of surgery. This should NOT be removed until your follow up appointment. Additionally, work on the finger range of motion exercises (see below) multiple times per day. It is very important to begin moving your fingers right after surgery and keep them moving to avoid stiffness. Your thumb will be immobilized in a splint and should not be moved until follow up.

Additional Information:

After surgery, you should expect some pain, swelling, and stiffness. Dr. Holt will talk to you about when it is safe to return to work. Most patients can return to light work (computer/desk work) within a few days, but it will often take 12 weeks to return to more demanding work (labor, construction, etc.). Grip and hand strength may come back as early as 3 - 4 months after surgery, but it can take up to 6 - 12 months to fully recover and obtain maximum improvement. In most cases, you will be transitioned to a cast at your follow up appointment and then a removable brace at approximately 6 weeks post-surgery. Therapy is often initiated at this time as well.

Follow-Up:

Your follow up appointment is generally 10 - 14 days after your surgery and should be in your discharge packet on the day of surgery. Call us if you have any questions at (541) 382-3344.

