Trapeziometacarpal Osteoarthritis: Arthroscopic Partial Trapeziectomy

M.D. Sammartino Martin, Perrone Juan Martin, Schiller Juan, Saenz Ramiro.

PURPOSE
Our hypothesis is that arthroscopic partial trapeziectomy technique can be applied to Eaton grade III injuries with satisfactory outcomes and reduce complications associated with open procedures (dorsal wrist incision and instability).

METHODS
40 patients presenting symptomatic trapeziometacarpal osteoarthritis with positive Grindt test and Eaton grade III on radiographs views were examined. An Arthroscopy confirmed the degree of injury and presence of loose bodies. Debridement, excision of loose bodies and partial trapeziectomy was performed. Visual analogue pain score, grip strength, ROM and radiographic assessment were used for outcome evaluation.

RESULTS
30 female and 10 male patient was treated. The mean age was 55 years, and the average follow-up was 2 years. Visual analogue pain score average was 8.8 preoperative and 1.1 postoperative. Mean ROM was complete interphalangeal and metacarpophalangeal flexion and extension. Average grip strength was 73% of the normal contralateral extremity. There were no complications.

CONCLUSIONS
Arthroscopic partial hemitrapeziectomy of grade III trapeziometacarpal joint showed reduced pain, increased range of motion, and satisfactory outcomes over 2 years. The presence of loose bodies could be an important factor for pain. Further assessment of this operative technique with direct comparison to standard approaches is warranted.

References: