

ATLAS CMC Joint Suspensionplasty - Patient Education

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Performed in the operating room with regional anesthesia and/or sedation (sometimes general anesthesia).

Surgical Procedure

During an ATLAS CMC joint suspensionplasty, surgery is performed to treat arthritis at the base of the thumb (the carpometacarpal/CMC joint). A small incision is made near the base of the thumb to address the painful arthritic joint and stabilize ("suspend") the thumb metacarpal to restore alignment and reduce pain while preserving thumb motion. Sutures are used to close the skin.

When you go home from surgery, you will have a bulky dressing and a thumb-spica splint in place to protect the reconstruction. You may experience numbness in your hand for a few hours (or longer) due to anesthesia. Swelling, bruising, and soreness are normal in the hand and forearm.

Post-op therapy will be part of recovery and will emphasize protection early, followed by gradual motion and strengthening.

Wound Care:

- Your thumb will be placed in a bulky dressing and thumb-spica splint after surgery. The splint helps protect the reconstruction, lessen swelling, and support the thumb while healing.
- **Keep the dressing and splint clean and dry until your first post-op visit with the hand therapist.**
 - You can cover your hand with a plastic bag when showering.
- **Do not remove the splint unless you are specifically instructed to do so.**
- Keep the incision clean and dry. If you are instructed to change an outer wrap, do not place ointment or lotion on the incision.
- **Do not submerge your hand in water (no swimming, baths, or hot tubs) until you are cleared.**
- Your hand and fingers may swell. Use an ice pack for up to 20 minutes at a time over the dressing to help ease the swelling. Be sure that you place a thin cloth between your skin and the ice pack to protect your skin. Do not get the splint wet.

Pain Management:

- Pain after CMC suspensionplasty can be moderate for the first several days. Pain is often worse at night, and elevating your hand is the most important factor when working to improve pain.
- Use Tylenol (acetaminophen) and/or ibuprofen as needed for pain unless otherwise instructed.
- Ice packs (20 minutes on, 20 minutes off) can help reduce swelling in the first 48 hours.
- Elevate your hand above heart level when resting to minimize swelling.

- If you were prescribed a stronger pain medication, take it only as directed. Do not drive or drink alcohol while taking narcotic pain medication.

Activity:

- Move your fingers often (open/close fully) to prevent stiffness and help with swelling.
- Keep the splint on and protect the thumb.
- You may use your hand for light activities that do not stress the thumb (typing, light self-care) as comfort allows.
- Avoid lifting anything heavier than a coffee cup unless you are specifically instructed otherwise.
- Light aerobic activity (walking, stationary bike) is typically okay within a few days, as comfort allows, as long as the hand remains protected.

Post Op Appointments:

After your procedure, you will have a post op appointment with a hand therapist approximately one week after surgery and two weeks after surgery with Dr. Weil to check the incision and remove sutures. Your splint plan will be reviewed, and you will typically transition into a custom removable thumb brace.

FAQ's

Can I drive myself home?

No. You will need someone to drive you home after your procedure.

How quickly am I able to return to basic activities like typing?

Many patients can type and do basic one-handed activities within a few days, as comfort allows. Your thumb will be protected in a splint.

Will I need to be in a splint after surgery?

Yes. You will be placed in a thumb-spica splint immediately after surgery. Immobilization is important to protect the reconstruction. This bandage will be removed at your first post op hand therapy appointment and you will be fitted for a removable splint.

How soon can I ski/snowboard/etc.?

Return to sports depends on healing, motion, and strength. Many patients resume higher-risk activities after they have good control of the thumb, the incision is healed, often 8-12 weeks (sometimes longer), depending on the activity.

What kind of anesthesia will I have?



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This procedure is commonly performed with a regional nerve block and sedation, sometimes with general anesthesia. Your anesthesia plan will be reviewed with you on the day of surgery.