

WRIST FUSION (STANLEY PIN)

Wrist fusion (arthrodesis) is performed to abolish the pain of rheumatoid arthritis, and to correct either instability or deformity of the joint.

The operation is intended to abolish extension, flexion and deviation of the wrist but will not prevent rotation of the forearm

This method involves the insertion of a pin across the wrist joint. It often can be achieved with only a small incision over the head of the middle (usually) finger metacarpal (knuckle). The picture shows the final inch of the pin being pushed in.

Sometimes it is necessary to make an additional incision over the wrist if (a) the joint is very deformed or if (b) other procedures are required

The operation is performed under general anaesthetic. Your hand will be placed in a bulky dressing, which may include a plaster to protect the operation. Movement of the hand and thumb-tip should be continued and you should perform normal light activities after the operation. Hand elevation is important to prevent swelling and stiffness of the fingers. You will stay in hospital for at least one night after your operation.

Two weeks after the operation, your stitches will be removed. Thereafter you will be able to step up your activities as guided by common sense. You will probably be provided with a protective splint if you use a stick, crutches or a frame to walk. The bones will not have joined solidly until 12 weeks after the operation.

There obviously will be some swelling and bruising. Look out for any redness or tenderness in the area around the wound that might indicate an infection. Do not apply antiseptic but please contact my secretary if you have any worries. The wound and the surrounding skin often become very dry and will be more comfortable if a moisturizer is applied, including the wound itself (e.g. E45 or Diprobase Creams).

Scar You will have a scar on the knuckle and possibly on the back of the wrist. Scars will be somewhat firm to touch and tender for 6-8 weeks. Massaging firmly with the moisturizing cream can help.

Infection This can occur after any operation and would be treated by antibiotics.

Non-union The bones do not always heal together with this technique but usually this does not prevent the operation producing a good solid and reliable wrist.

Pin This is intended to be left in place. However, its removal may be needed if (i) further surgery to the region is needed or (ii) in the rare event that the pin moves, loosens or snaps.

Stiffness About 5% (1 in 20) of people are sensitive to hand surgery and their hand may become swollen, painful and stiff after any operation (algodystrophy). This problem cannot be predicted but can be contributed to under-use of the arm and failure to do the exercises. It is treated with physiotherapy.

