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Finger Joint Arthritis

Osteoarthritis is 'wear and tear' of the cartilage of joints. Patients notice pain, swelling, stiffness, extra lumps of bone growing (osteophytes), and possibly deformity of the fingers. Arthritis can occur at any age, especially after injury, but is usually found in the hand after the age of 45.

Osteoarthritis often affects the finger joints, particularly the distal interphalangeal joints at the end of the finger, and the trapezio-metacarpal joint at the base of the thumb.

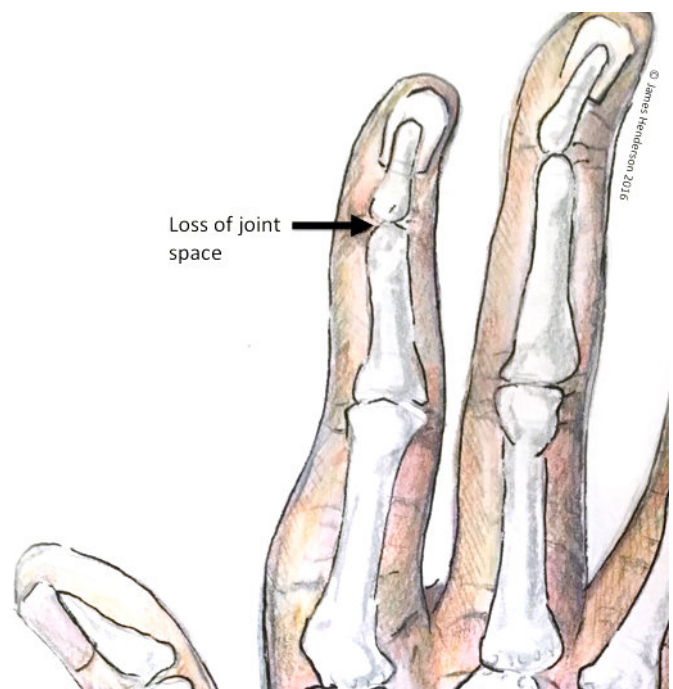
Although arthritis tends to gradually worsen, there is more to the process than simply 'wearing out'. Because inflammation is an important part of the process, symptoms can follow a fluctuating course, with some improvement between episodes, especially if triggering activities can be avoided.

X-rays are usually all that is needed for confirming the diagnosis and planning treatment. Occasionally other tests are required.

Treatment

Steroid injections can be given in the clinic. These can be very useful for early arthritis, or to provide a period of relief in worse disease. If the bones are very worn, then the anatomy is distorted, and injections might need to be done under x-ray or ultrasound guidance.

Surgery is generally planned to remove painful joints, sometimes by fusing them, which means that the joint would be fixed and cannot move. This is a good option for certain joints, or for certain patients, but needs to be considered carefully.



Joint replacement with a synthetic joint is possible for many of the joints in the hand, even the very small ones. This allows patients to retain a range of movement at the joint, but does require commitment to a course of physiotherapy, and use of a splint for some weeks after the surgery. These options will be discussed fully at your consultation.

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