

Hand and Wrist Arthritis



What is Hand and Wrist Arthritis?

Arthritis refers to wear and tear or inflammation of the joints, leading to pain, stiffness, and reduced movement. In the hand and wrist, arthritis most commonly affects the **finger joints** and the **wrist joint**.

Finger arthritis often affects the **distal interphalangeal joints (DIP joints)**, **proximal interphalangeal joints (PIP joints)**, and sometimes the **metacarpophalangeal joints (MCP joints)**. Wrist arthritis may involve the **radiocarpal joint** or develop following previous injuries such as fractures or ligament injuries.

Arthritis in the fingers and wrist can make everyday tasks—such as gripping objects, turning keys, or opening jars—difficult and painful. Symptoms often develop gradually over time.

Causes and Risk Factors

Finger and wrist arthritis is **multifactorial** and develops due to a combination of factors.

Common contributing factors include:

Age

While arthritis can affect adults of any age, it becomes more common with increasing age.

Previous Injury

Fractures, ligament injuries, or joint damage may lead to **post-traumatic arthritis**, sometimes developing years after the original injury.

Genetics

A family history of arthritis may increase the likelihood of developing the condition.

Repetitive Hand Use

Occupations or hobbies involving frequent gripping or repetitive movements may increase stress on the joints.

Inflammatory Conditions

Conditions such as **rheumatoid arthritis** can affect the finger and wrist joints.

Joint Instability

Previous ligament injuries or abnormal joint mechanics may increase wear within the joint.

Symptoms

Symptoms of finger and wrist arthritis can vary depending on the severity and location of the arthritis.

Common signs include:

- **Pain** in the affected joint, particularly during movement
- **Stiffness**, especially in the morning or after rest
- **Swelling** around the joints
- **Reduced movement** or difficulty bending or straightening the fingers or wrist
- **Weakness** when gripping objects
- **Grinding or grating sensations** during movement (crepitus)
- **Tenderness** when touching the joint

In **finger arthritis**, additional symptoms may include:

- **Bony swellings** around the finger joints
- Gradual **deformity** of the fingers
- Reduced fine motor function, such as difficulty fastening buttons

In **wrist arthritis**, symptoms may include:

- Pain across the wrist, often worsened with weight-bearing through the hand
 - Reduced wrist movement
 - Difficulty performing tasks requiring wrist strength
 - Gradual loss of grip strength
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Diagnosis & Investigation

Finger and wrist arthritis is diagnosed **based on clinical history and physical examination**, supported by imaging.

During your visit:

- The surgeon will ask about the **duration of symptoms**, severity of pain, and any previous injuries.
- A **physical examination** will assess swelling, tenderness, deformity, and joint movement.
- Grip strength and hand function may also be assessed.

Imaging

- **X-rays** are usually performed to confirm the diagnosis and assess the degree of arthritis.
 - In **rare cases**, additional imaging such as **CT** or **MRI scans** may be used to assess complex joint involvement or associated conditions.
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Non-Surgical Treatment

Many patients can manage finger and wrist arthritis without surgery, particularly in the early stages.

Non-surgical treatment options may include:

- **Splinting**, to support the affected joint and reduce pain
- **Activity modification**, avoiding repetitive or heavy loading activities
- **Pain relief medication**, such as paracetamol or anti-inflammatory medication
- **Corticosteroid injections**, which may provide temporary pain relief
- **Hand therapy**, including exercises to improve strength and maintain movement
- Use of **assistive devices**, such as jar openers or ergonomic tools

These treatments aim to reduce pain, maintain function, and slow progression of symptoms.

Surgical Treatment

Surgery may be considered if symptoms remain severe despite non-surgical treatment or significantly affect daily activities.

The choice of surgery depends on the **joint involved**, **severity of arthritis**, and **functional demands** of the patient.

Finger Joint Fusion (Arthrodesis)

Fusion involves permanently joining the bones of the joint to eliminate movement and relieve pain. This is commonly used for:

- **DIP joint arthritis**
- Selected **PIP joint arthritis**
- Some **MCP joint arthritis**

Fusion provides reliable pain relief but results in loss of joint movement.

Finger Joint Replacement (Arthroplasty)

Joint replacement involves replacing the damaged joint with an artificial implant. This is most commonly performed in:

- **PIP joints**
- **MCP joints**

Arthroplasty aims to relieve pain while preserving some movement.

Wrist Denervation

This procedure involves interrupting sensory nerves around the wrist to reduce pain without altering joint structure. It may be an option for patients wishing to postpone more invasive surgery, as it often provides good shorter-term results.

Proximal Row Carpectomy (PRC)

This procedure involves removing several carpal bones to improve movement and reduce pain. It is commonly used in certain patterns of wrist arthritis.

Partial Wrist Fusion

This involves fusing selected carpal bones to stabilise the wrist while preserving some movement.

Wrist Arthroplasty (Replacement)

Wrist arthroplasty, or wrist replacement, involves replacing the damaged wrist joint with an artificial implant. This procedure aims to relieve pain while preserving wrist movement.

Wrist replacement may be suitable for selected patients, particularly those with **lower physical demands**, where maintaining movement is important. It is not usually recommended for individuals who perform heavy manual work due to the risk of implant wear or failure.

Total Wrist Fusion

In severe cases, the wrist bones may be fused completely. This reliably relieves pain but results in loss of wrist movement.

Total wrist fusion may be more appropriate for individuals with **higher functional demands**, particularly those performing manual work.

Recovery

Recovery following surgery varies depending on the type of procedure performed.

- **Hand therapy** is usually recommended to restore strength and function.
- Some swelling and stiffness are common following surgery.

Recovery times vary depending on treatment:

- **Finger joint fusion** typically requires immobilisation until the bones heal.
 - **Finger joint replacement** allows earlier movement but requires rehabilitation.
 - **Wrist denervation** typically shows recovery within **approximately 2 weeks**.
 - **Proximal row carpectomy** and **partial wrist fusion** require structured rehabilitation.
 - **Wrist arthroplasty** allows preservation of movement but requires careful rehabilitation.
 - **Total wrist fusion** requires longer immobilisation and gradual return to activities.
 - Full recovery may take **several months**, depending on the procedure performed.
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Risks

Although treatment is usually successful, complications can occur, including:

- Infection
- Stiffness
- Persistent pain
- Implant failure (in joint replacement procedures)
- Non-union following fusion
- Loss of movement
- Nerve injury

Careful planning and rehabilitation help reduce the risk of complications.

When to See One of Our Hand Specialists

You should consult a hand specialist if:

- You have **persistent wrist pain** following an injury
- You notice **clicking or clunking** in the wrist
- Your wrist feels **weak or unstable**
- Symptoms do not improve after initial treatment
- You have ongoing pain following a previous wrist injury

If you have sustained a severe injury, have significant deformity, or have an open wound associated with a fracture or ligament injury, this should be assessed urgently in the Emergency Department (A&E).

Book an appointment:

