

# **Arthroscopy of the Wrist**

# What is Wrist Arthroscopy?

Wrist arthroscopy, also known as **keyhole surgery**, is a **minimally invasive** procedure used to diagnose and treat conditions affecting the **wrist joint**. It involves inserting a small **telescope** (**arthroscope**) through tiny incisions to examine the **internal structures** of the wrist. Specialized surgical instruments can also be used to **repair or remove damaged tissues** without the need for a larger incision.

Your **surgeon has recommended a wrist arthroscopy**, but the decision to proceed is yours. This document provides information on the **procedure**, **benefits**, **and risks** to help you make an **informed choice**.

If you have any **questions** that are not addressed here, it is important to consult your **surgeon or healthcare team**. Once all your concerns are addressed and you decide to proceed, you will be asked to **sign an informed consent form**—this is the final step in the **decision-making process**. However, you can **change your mind at any time** before the procedure.



An arthroscopy of the wrist

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# **Benefits of Surgery**

The primary goal of wrist arthroscopy is to **identify the underlying problem** in the wrist and, in many cases, provide **treatment at the same time**. **Keyhole surgery** offers the advantage of **reduced postoperative pain** and, for some patients, a **faster recovery compared to open surgery**.

### **Alternatives to Surgery**

**Imaging tests** such as **MRI and CT scans** can help diagnose wrist problems. However, they may not detect **early joint damage, small ligament injuries**, or the **extent of cartilage deterioration**. When these tests are inconclusive, an **arthroscopy may be necessary** to both **diagnose and treat the condition**.

## What Happens if You Do Not Have Surgery?

If left untreated, **wrist symptoms may worsen over time**. In some cases, symptoms **may improve naturally** or with modifications in daily activities. However, for **persistent pain, stiffness, or limited movement**, surgical intervention may be necessary to **prevent long-term complications**.

### **Procedure Overview**

#### **Before the Operation**

- **Remove any rings** from your hand before arriving at the hospital.
- The **healthcare team will perform safety checks** to ensure the correct procedure is carried out. You can assist by **confirming your name and the procedure** with your surgeon and team.

### During the Operation

- The procedure typically takes about 20 minutes.
- Various anaesthetic techniques are available, which your anaesthetist will discuss with you.
- Local anaesthetic injections may be used to help manage postoperative pain.
- Antibiotics may be administered to reduce the risk of infection.
- A small frame is used to support your arm, and fluid is injected into the joint to enhance visibility. A tourniquet may be applied to minimize bleeding.
- Your surgeon will make 2 to 4 small incisions (each approximately half a centimeter long).
- A tiny telescope is inserted through one incision to examine the joint, while surgical instruments are introduced through the others to remove inflamed tissue, repair torn cartilage, or remove loose fragments.

- Any removed tissue may be **sent to a laboratory** for further analysis.
- The incisions will be closed with stitches or adhesive strips, and a brace or cast may be applied.

### **Medication Considerations**

- Inform the healthcare team about all medications you take, including blood thinners, herbal supplements, and over-the-counter medications.
- Anti-inflammatory painkillers may affect healing, so consult your doctor before taking them.

### **Preparing for Surgery**

- **Quit smoking** to reduce the risk of complications and improve healing.
- **Maintain a healthy weight** to lower the risk of surgical complications.
- **Regular exercise** can aid recovery—consult your doctor for appropriate pre-surgical exercises.
- **Reduce infection risk** by:
  - Avoiding **shaving or waxing** near the surgical site one week before surgery.
  - Bathing or showering **the day before or on the day of surgery**.
  - Keeping warm before surgery and informing the healthcare team if you feel **cold**.
  - Managing blood sugar levels if you have diabetes.

### **Possible Complications**

The healthcare team takes precautions to **minimize risks**, but **complications can still occur**. Some risks are **higher for older patients**, **smokers**, **and individuals with pre-existing health conditions such as diabetes**, heart disease, or lung disease.

### **General Surgical Risks**

- **Bleeding** during or after surgery, though this is rare due to the use of a **tourniquet**.
- **Infection** of the surgical site (**risk: 1 in 1000**). If signs of infection (e.g., redness, pain, pus, fever) occur, seek medical attention. Antibiotics may be required, and in severe cases, another procedure may be needed.
- **Allergic reactions** to medications, surgical equipment, or materials used in the procedure. Inform the team about any known **allergies**.
- **Chest infections**, particularly in smokers.

### Specific Risks of Wrist Arthroscopy

- Bleeding into the joint (risk: 1 in 100) may cause pain and swelling. A second arthroscopy may be needed to flush out the joint.
- Infection of the wrist joint (risk: less than 1 in 100), requiring antibiotics or additional surgery.
- Complex regional pain syndrome (CRPS) (risk: 7 in 100), causing severe pain, stiffness, and loss of hand function. This condition can take months or years to improve, and in some cases, may be permanent. Taking vitamin C daily for six weeks post-surgery may help reduce this risk.
- Nerve damage (risk: less than 1 in 100) can lead to weakness, numbness, or pain—most cases improve, but some may be **permanent**.
- Tendon damage, particularly affecting the **thumb-extending tendon**, which may require **surgical repair**.

### **Recovery and Aftercare**

In the Hospital

- After surgery, you will be transferred to the **recovery area** before being discharged.
- You may need to keep your arm elevated to reduce swelling.
- Most patients go home the same day, but some may need to stay longer.
- Contact the healthcare team if you experience **unusual pain**, **swelling**, **or signs of infection**.

#### Returning to Normal Activities

If you receive sedation or general anaesthesia, follow these precautions for the first 24 hours:

- Have a **responsible adult accompany you home** and stay with you.
- Avoid driving, operating machinery, or engaging in hazardous activities.
- Do not consume alcohol or sign legal documents.
- If a brace or cast is applied, consult your surgeon about when it can be removed.
- Keep the wound dry for 4 to 5 days and use a waterproof dressing when showering.
- Any stitches will dissolve or be removed within 1 to 2 weeks.
- Follow the physiotherapist's advice to regain wrist strength and mobility.
- Avoid contact sports or heavy lifting until cleared by the healthcare team.

Regular exercise should aid recovery—seek guidance from the healthcare team or GP before starting.

#### Driving and Work

- **Do not drive** until you have **full control of your wrist**, including in emergencies.
- Check with your insurance provider and healthcare team before resuming driving.

#### Long-Term Outlook

- Most patients experience significant improvement, though pain relief and mobility restoration take time.
- Some symptoms may return over time, potentially requiring further treatment.
- If the arthroscopy was performed for diagnosis, a follow-up appointment will be scheduled to discuss further treatment.
- If a **biopsy was taken**, results will usually be available within **three weeks**.

### **Summary**

Wrist arthroscopy is a **minimally invasive procedure** that allows surgeons to **diagnose and treat joint problems** with **less pain and a quicker recovery** than traditional open surgery.

Surgery is generally **safe and effective**, but **complications can occur**. Being **informed** will help you **make the right decision** and recognize any **postoperative issues** early.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

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