Metacarpophalangeal Joint Arthroplasty
Therapy Instructions
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1 week
Therapy is started to focus on recovery of motion to the finger joints adjacent to the arthroplasty. In addition, a removable splint is fashioned for the affected joint(s).

Splint:
- Fashion a volar, short-arm orthoplast splint holding the wrist in 15 degrees of extension and MCP joints in 15 degrees of flexion. The PIP and DIP joints should be left free.
- Build an ulnar-sided flare in to the phalangeal portion of the splint to hold the proximal phalanx in slight radial deviation.
- Wear splint at all times, including with therapy.

Motion:
- AROM/AAROM/PROM of the fingers and finger joints adjacent to the arthroplasty.
- Flexor and extensor tendon gliding exercises.
- Forearm motion unrestricted.
- 2 lbs lifting restriction.

Edema Control:
Coban, digit sleeves, ACE wrap, edema modalities per therapist.

2-6 weeks
Splint:
- If an extensor centralization was performed, continue use of the splint full-time for 4 weeks with therapy.
- If no extensor centralization was done, the splint can be removed with therapy starting at 2 weeks.
- At 4 weeks, cut the splint back to be hand-based rather than forearm-based.

Motion:
- AROM/AAROM/PROM of the fingers and finger joints adjacent to the arthroplasty.
- AROM out of the splint to the operated joint 2 weeks (no extensor centralization) or 4 weeks (with extensor centralization).
- Flexor and extensor tendon gliding exercises.
- Wrist/forearm motion unrestricted.
- 2 lbs lifting restriction.

Edema Control:
Coban, digit sleeves, ACE wrap, edema modalities per therapist.

6 -10 weeks
Continue to focus on finger ROM and begin to include strengthening. Transition to home exercise program by 8-10 weeks as symptoms allow.
Splint:
- Wean from splint during daytime by 8 weeks; continue at night until 10-12 weeks.
- If an extensor lag is present, re-mold splint to hold MCP joints in full extension.

Motion:
- Begin gentle finger strengthening using putty or other modalities per therapist.
- 5 lbs lifting restriction starting at 6 weeks.
- 10 lbs lifting restriction at 8 weeks.

Edema Control:
Per therapist.

**10-12+ weeks**
Continue therapy past 10 weeks only if additional work conditioning is required.

Splint:
- Discontinue if still using during the day.

Motion:
- No restrictions at 10 weeks.