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Title

APL-based Reconstruction for Dynamic First CMCJ Instability in High-functioning Patients: Early Results

Purpose

This case series describes an alternative to the conventional FCR-based CMCJ stabilization technique. The proposed technique, based on split APL tendon, affords anatomical reconstruction of the anterior oblique and dorso-radial ligaments through bone tunnels from volar and dorsal approaches.

Methods

Ten patients who presented with symptomatic post-traumatic first CMCJ instability underwent this procedure following failure of conservative management and were followed up to a year with evaluation of pain score, pinch strength (% contralateral), and return to baseline function, during follow up consultations.

Results

All patients who underwent first CMCJ stabilization with an APL tendon graft experienced pain relief. Pinch strength closely approximated that of the contralateral side. Majority of patients managed to return to their baseline level of function.

Conclusion

Good functional outcomes were achieved with our technique of first CMCJ stabilization with an APL tendon graft. Moving forward, a randomized controlled trial can be designed to study the effectiveness of our technique in comparison to more conventional techniques.