



Ulnar collateral ligament injury

This leaflet outlines the type of treatments, general advice and information following an ulnar collateral ligament repair.

What is an ulnar collateral ligament?

The ulnar collateral ligament (UCL) is a strong band of connective tissue that attaches to the inside part of the middle thumb joint, stabilising the joint from sideways forces. This ligament can be injured by a partial or complete tear caused by a high impact forcing the thumb away from the hand.

It is often referred to as a 'gamekeeper's thumb' or 'skier's thumb', based on the mechanism of injury. The type of treatment depends on the level of injury.

For less severe injuries, the thumb is immobilised (kept still) in a cast or splint for at least 6 weeks to allow the ligament to heal back onto the bone.

Surgery is required when someone has a:

- Stener lesion – the UCL is torn and positioned in the wrong place and gets caught behind the adductor aponeurosis muscle
- Complete UCL tear
- Avulsion fracture – if the tear also resulted in fracturing the bone greater than one-third the joint surface.

What to expect if you are having surgery

You will have surgery to repair the UCL of your thumb and reconnect the ligament to the bone.

After your surgery, your thumb will be placed in a padded dressing and plaster cast for 2-4 weeks. It is important to elevate (raise) your arm in a sling or on pillows to manage swelling.

After this time, you will see a hand therapist to change to a removable splint and begin rehabilitation.

Full activity can usually resume after 3 months following surgery or when recommended by your surgeon.

Hand therapy following UCL repair surgery

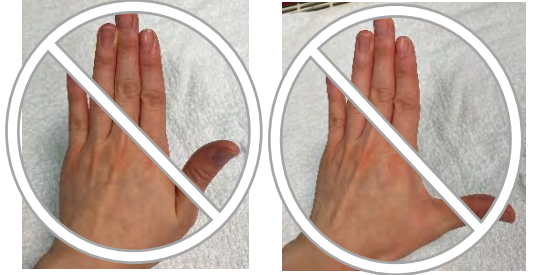
Week 0-4

- Your thumb will be immobilised in a cast.
- Bend the tip of your thumb within your cast.
- Mobilise your unaffected fingers, wrist, elbow and shoulder.



Week 4

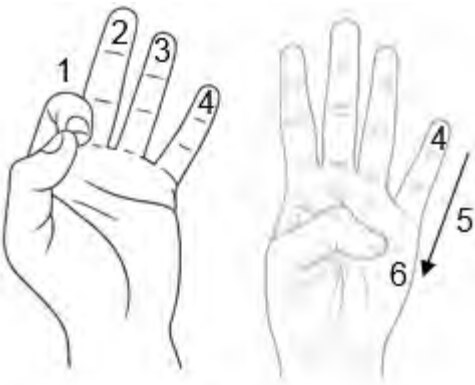
- Wear your splint full-time except for exercises and to clean the splint with a wipe.
- Bend the tip of your thumb.
- Flex middle thumb joint in-line with your palm, as taught by your therapist.
- **No thumb opposition** – touching your thumb to your fingertips.
- **No thumb extension** – lifting your thumb above your hand.
- **No thumb abduction** – thumbs up or 'L'.



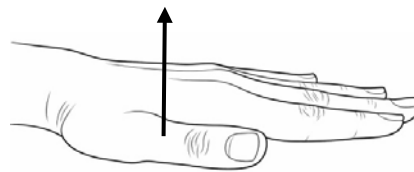
Week 6

- Your hand therapist will assess how stable your thumb is. If it is stable, you will change to a soft thumb splint.
- Gentle thumb range of movement – flexion, extension, abduction, opposition.
- Avoid any outward stress to your thumb in an extended or abducted position.
- No heavy gripping or pinching.

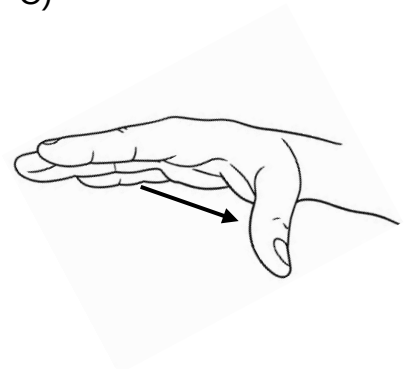
A



B)



C)

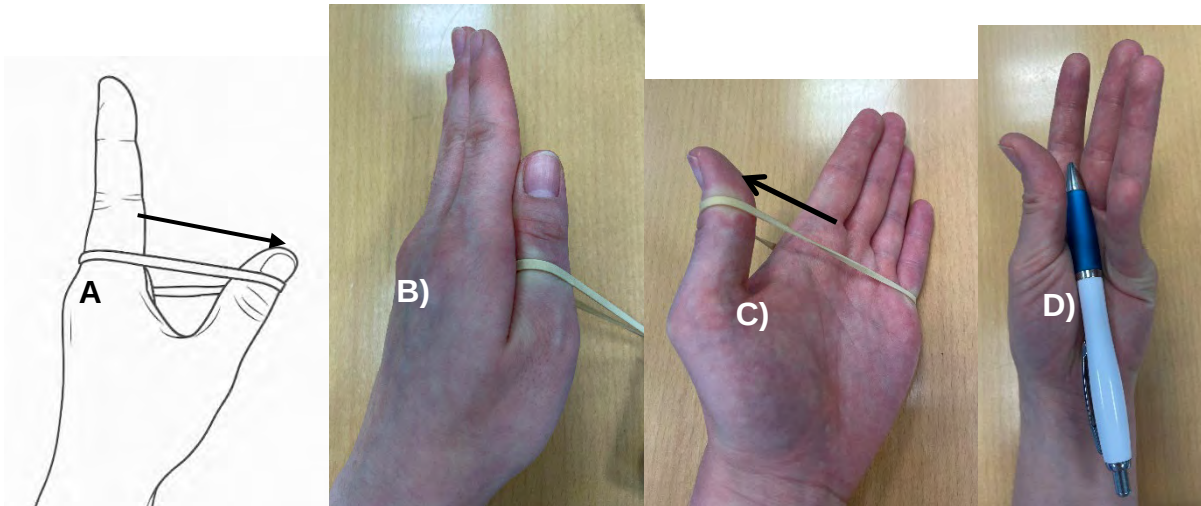


- A) Touch your thumb to the tip of each finger. Once you touch the tip of the little finger, track the thumb down the little finger towards the palm as if to make the number four. Repeat this 10 times.
- B) Lay your hand flat on a surface. Lift the thumb up so that is above the hand and hold it for 5 seconds. Lower the thumb back down. Repeat this 10 times.
- C) Turn your hand so your palm is facing the floor. Lower the thumb so that it is pointing towards the floor. Bring the thumb back up. Repeat this 10 times.

Week 9-12+

- Able to return to normal activity, including grip, pinch, weight-bearing, and sports.
- Thumb strengthening exercises:
 - A) Wrap a rubber band around your fingers and thumb. Bring your thumb out in front of your palm. Hold for 3 seconds and return to the starting position. Repeat this 10 times.

- B) Wrap a rubber band around your thumb. Keep your thumb touching your index finger. Use your other hand to put tension on the rubber band.
- C) Wrap a rubber band around your thumb. Bring the thumb away from the index finger. Hold for 3 seconds and return to the starting position. Repeat this 10 times.
- D) Place a pen or similar sized object in between your palm. Squeeze the object with the base of the thumb and little finger inwards to keep the object from falling out. Hold this for 3 seconds, then relax. Repeat this 10 times.



Contact information

Physiotherapy East Outpatient Department: 0118 322 7811 / 7812 Mon-Fri 8-4p

Please leave a voicemail if you are not able to speak with the department.

Email: rbft.physiotherapy@nhs.net

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Physiotherapy (Hand Therapy), July 2026

Created by Janet Yi, Occupational Therapist

Next review due: July 2028