

GRIP

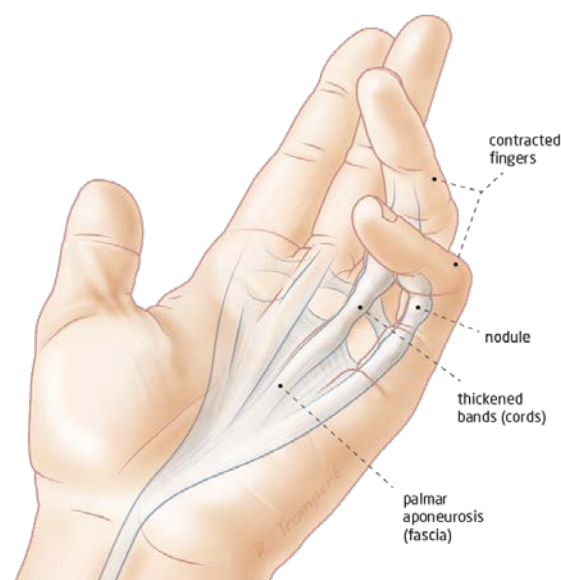
Hand, Wrist &
Reconstructive
Surgery

Selective Fasciectomy for Dupuytren's Disease

Dupuytren's Disease

Strong fibrous tissue in the palms of our hands gives stability to the skin and the ability to grip and hold objects firmly. Dupuytren's disease can cause this fibrous tissue to become lumpy (nodules) or to form strong cords that bend one or more joints of the fingers towards the palm.

It often has a genetic background, can involve one to 10 fingers and has an unpredictable course. It can progress quickly or stay stationary indefinitely. Dupuytren's disease cannot be cured, but the symptoms can be treated operatively or non-operatively depending on the severity, patient wishes and expectations.



Your operation

Your Dupuytren's contracture will be treated by surgical removal of the fibrous tissue from the palm and fingers (selective fasciectomy). The operation usually takes place as a day surgery procedure, using general anaesthesia and a local anaesthetic for postoperative pain relief. The operation usually takes about 30-45 minutes per finger.

An incision is made over the fibrous cord and the involved tissue is removed. A joint release may be needed (PIP joint release) to straightening the finger further. The skin is closed in a zig-zag fashion (Z-plasties) using sutures. In some cases, a skin graft is needed to assist in closing the wound.

A tape bandage (Hypafix) will cover the wound under a soft hand dressing or plaster splint.

After the operation

Day of surgery: some or all your fingers may feel numb or tingly for 6-36 hours due to the local anaesthetic. You can start to move and use your thumb and fingers not covered by the dressing for light duties before you leave the hospital.

Day 1-5 after surgery: keep the dressing clean and dry. If you have a soft dressing only, you can remove it on day 4 or 5 after the operation. Keep the tape bandage on your skin intact. If you have a plaster splint, the hand therapist will replace it with a plastic, removable splint to wear at night. If required, a referral to the hand therapist will be arranged for you.

Day 5-14 after surgery: the tape bandage on your hand can get wet under the shower or when washing your hand. Just dab it dry with a towel afterwards. If it comes off, use a simple bandaid to protect the sutures. Use your hand lightly as tolerated and avoid heavy duties.

Two weeks after surgery: your progress will be reviewed by the doctor or practice nurse. Skin sutures will be removed during this visit. If needed, a new tape bandage will be placed for another 3-5 days.

Six weeks after surgery: if needed, another follow up appointment will take place to monitor your progress. In some cases, it may be required to wear the night splint for more than 6 weeks after surgery.

Recovery

In most cases, the wounds heal in 2-3 weeks. Normal hand use can start shortly after. Peeling of some superficial skin or scabs are common. The area around the scar may remain tender or swollen for 2 or sometimes 6 weeks after surgery. Moisturising and gentle massage of the palm is helpful. If needed, you will be referred to a hand therapist to assist you with your recovery.

Potential complications

Surgery for Dupuytren's contracture is routine, safe and complications are uncommon. These complications can include: wound healing problems, infection, bleeding, bruising, nerve injury, ongoing tenderness around the scar or slower than expected recovery. Cords can come back or appear in new areas, causing the operated finger or other fingers to bend again. Particularly the little finger is prone for recurrent contractures. Another procedure may be required in the future.

Driving after surgery

General advice on driving after surgery:

- » there is no legislation that covers surgery and driving
- » you must be able to safely control your car well, even in an emergency situation
- » some insurers will not cover any damage or liability if you had "recent surgery", if you were wearing a splint or cast whilst driving, or were using (pain) medication that could affect your ability to drive
- » it is advisable to contact your insurer before you are planning to drive again after your surgery
- » check with your surgeon if driving may affect the outcome of your rehabilitation.

CONTACT

If you have any questions or have concerns after your surgery, please contact our rooms during office hours on **08 7127 0365**.

After hours, please contact Dr. Paul van Minnen by phone call or text message:

08 7127 0365



285 Wakefield Street, Adelaide, SA 5000 t 08 7127 0365 f 08 7070 0950

Visit us online... www.gripsurgery.com.au

Society member of:



Disclaimer: All information provided on this handout should be considered as general guidelines. Actual practice and (expected) outcomes may differ in your case.