Dupuytren's Contracture

Palmar fibromatosis, otherwise known as Dupuytren's contracture is a genetic condition that affects the hands. Over time the layer of tissue that lies under the skin of your palm knots and creates a thickened cord, pulling a single or multiple fingers into a bent position. The affected fingers will not be able to be straightened. Dupuytren's contracture can have different patterns in which it affects the hands but mainly affects the two fingers farthest from the thumb and can range from mild to very severe.

CAUSES OF DUPUYTREN'S CONTRACTURE

It is known to have a genetic component, and is common in people with European ancestry. It occurs most commonly after the age of 50 and may progress slowly at first. Risk factors include a family history of Dupuytren's disease, as well as diabetes, liver disease and tobacco and alcohol use.

Contact us

George Surgical Centre, 2nd floor,
26 Gloucester Ave (Cul-de-Sac), George

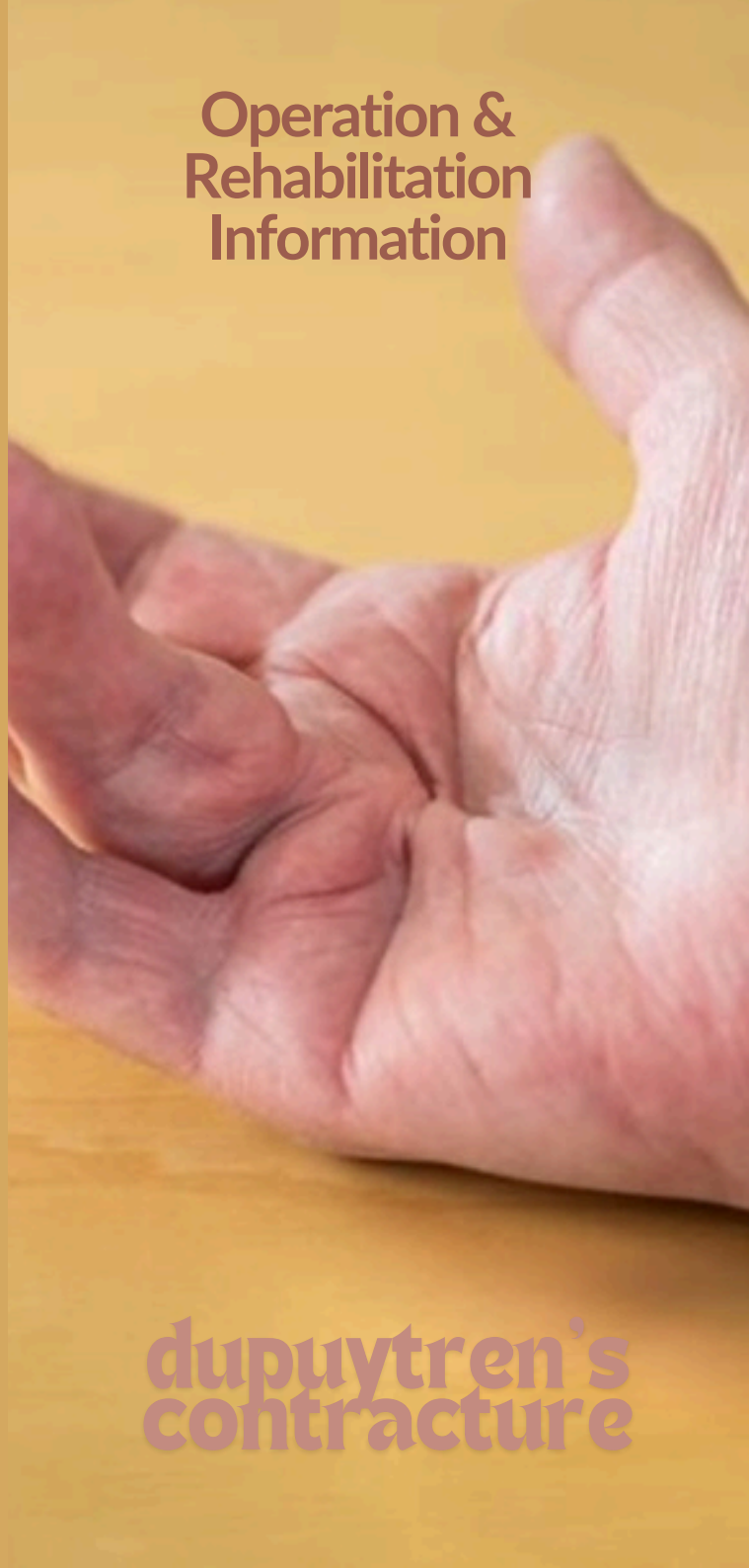
(044) 0501352 (Bussiness hours)

info@gardenroutehandsurgeon.co.za

www.gardenroutehandsurgeon.co.za

HANDUNIT gardenroute

Operation & Rehabilitation Information



dupuytren's contracture

HOW IS DUPUYTREN'S CONTRACTURE TREATED?

If there are no or minimal contractures, the hand can often just be observed. In general Dupuytrens is a progressive disease, and there is no effective way of preventing it from deteriorating.

Once a contracture occurs, treatment is aimed at straightening the affected fingers, as well as preventing worsening of the deformity. This can be done through different surgical techniques.

SURGERY FOR DUYPUTREN'S CONTRACTURE

Surgeries include a needle fasciotomy or a subtotal palmar fasciectomy. With a needle fasciotomy, the thickened cord is perforated and torn to decrease the contracture and increase movement in the hand, without creating a large wound or requiring long recovery.

The goal for a subtotal palmar fasciectomy, on the other hand, is to remove as much abnormal tissue as possible so that the fingers can become mobile and straight again, with a smaller chance of the contracture developing again.

The most appropriate technique will be decided in consultation with each patient. In most cases, hand therapy will be needed afterwards.

POST-OPERATIVE CARE & REHABILITATION

After surgery, the operated hand must be kept **clean and dry**. Swelling and tenderness may occur, for which **elevating** the hand will be useful. The **dressings** must remain in place until your first post-op visit with the therapist or surgeon, at which stage a custom-made **splint** will be applied and therapy will commence.

Numbness and tingling may occur while the sensation returns, but pain can be controlled effectively by taking **pain medication** before the local anaesthetic or nerve block wears off completely. Return to function will be guided by the therapist, with the focus on achieving independence as soon as possible.