

Managing Dupuytren's disease

Dupuytren's disease is a disorder of the palmar fascia of the hand. The palmar fascia is the connective tissue lying under the skin in the palm and the fingers. The condition may vary from small lumps, or bands, to very thick bands that cause the fingers to curl into the palm of the hand. Typically the little and ring fingers are the most commonly affected but it can also affect the thumb.

Cause

The cause of Dupuytren's disease is unknown, but it is thought that there is a genetic link. In some cases it is thought that trauma can trigger its occurrence in those that are genetically predisposed or it can worsen a pre existing condition.

Treatment

Once the finger(s) have curled into the palm and are beginning to impair your use of your hand, surgery may be indicated. Surgery can help improve your use of your hand but it does not eliminate the disease.

Surgery involves removing the constricting tissue with the aim of regaining full finger extension. Sometimes this is not possible due to changes in the joint or the surrounding structures.

When can I go back to doing things?

After your surgery while the stitches and dressing are in place you will need to keep the hand clean and dry so this is likely to limit what you can do with your hand.

In general during the first few weeks limit yourself to light tasks ie light meal preparation, writing and typing for short periods. Avoid activities that require a firm grip or heavy lifting as this may cause you pain and could compromise the healing of the wound. It is likely that it will take 6-12 weeks to regain the full use of your hand.

When can I drive?

Before you starting driving you must contact your insurance company and inform them that you have had recent surgery. If your insurance company's agreement, you can recommence driving as soon as you have enough movement and strength to drive comfortably and confidently.

Therapy after surgery

After you have had your surgery, your hand will initially be in a bulky dressing. It is important to keep your hand elevated to control the swelling that occurs after surgery. Stitches are usually removed between 10 to 14 days. At this point you will start your Occupational Therapy/Physiotherapy. It is likely that it will take 6 to 12 weeks to regain the full use of your hand. The therapist will encourage you to engage in a programme of scar massage, ways to reduce the swelling in your hand and fingers, desensitisation and exercise.

The therapist will probably fabricate you a thermoplastic splint and advise you to wear this at night. Wearing the splint helps stop the scars that were produced by the surgery from contracting. You might find that your hand is stiff in the morning but this stiffness will wear off by

doing your prescribed exercises and using your hand. The splint should be worn for the next four to six months. Your therapist will discuss this with you in more detail.

Exercises

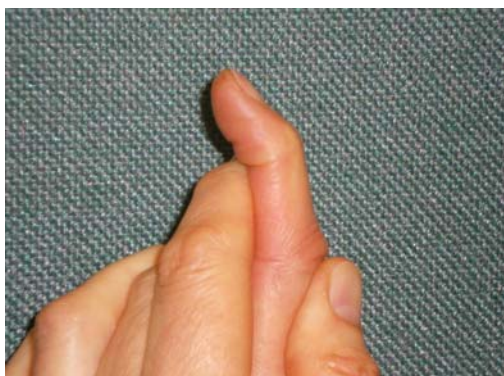
Tendon gliding exercises

1. Fingers straight
2. Table top, knuckles bent, fingers straight
3. Hook fist, knuckles straight, fingers bent
4. Flat fist, fist with tips of fingers straight
5. Full fist

Blocked extension exercises



With your other hand and thumb stop the bottom joint (knuckles) of your finger at 90 degrees. Try to straighten the middle joint of your finger.



With your thumb and finger, block the middle joint and try to straighten the end joint of your finger.

Passive flexion

Using your other hand, gently push each of your fingers in to make a fist..

Sources of information

BAHT- British Association of Hand Therapists, ESHT Special interest Hand Therapy group.

Further Information

If you have any questions or queries regarding any of the information, please do not hesitate to ask your Specialist Therapist in the Occupational or Physiotherapy Department.

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments please contact our Patient Advice and Liaison Service (PALS) – details below.

Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

This information is available in alternative formats such as large print or electronically on request. Interpreters can also be booked. Please contact the Patient Advice and Liaison Service (PALS) offices, found in the main reception areas:

Conquest Hospital

Email: esh-tr.palsh@nhs.net - Telephone: **01424 758090**

Eastbourne District General Hospital

Email: esh-tr.palse@nhs.net - Telephone: **01323 435886**

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

Written by:). Written by: Jacqueline King, Specialist Occupational Therapist – Hand Therapy
The following clinicians have been consulted and agreed this patient information: Jacky Thomas, Specialist Occupational Therapist- Hand Therapy, Eastbourne District General Hospital, Sarah Sharp, Specialist Physiotherapist- Hand Therapy, Eastbourne District General Hospital, Christine George, Specialist MSK Physiotherapist, Conquest Hospital and Michelle Hegarty, Team Lead, MSK Physiotherapy, Newhaven Polyclinic.

Next review date: October 2018
Responsible clinician/author: Jacqueline King, Specialist Occupational Therapist - Hand Therapy, Newhaven Polyclinic and Eastbourne District General Hospital.

© East Sussex Healthcare NHS Trust – www.esht.nhs.uk