

## **Dupuytren's fasciectomy**

I do this operation approximately once a month for contractures of the fingers. This is usually done as a day case under general anaesthetic, but can be performed under a regional block.

A regional block involves an injection in the armpit or in the base of the neck/shoulder region. This will make the arm numb for 12 to 36 hours.

More complex cases require an overnight stay.

The operation takes about one hour per finger. The cord and nodules are excised and a zigzag incision is usually used.

A full correction is usually achieved but scarring later is the main problem.

Splintage after surgery is usual and is carried out by our hand therapists. The original dressing is a wool and crêpe bandage with a layer of plaster of Paris inside to hold the fingers in the straight position. This comes off at 2 weeks. The stitches removed at this point. If the wound is clean and dry no further dressings are required and splintage can begin along with rehabilitation of the hand. Usually the thumb and some of the fingers are not included in the dressing and can be used normally from 24 to 48 hours after the surgery. It is usually possible to use the hand for dressing and personal care. It is usually possible to use some cutlery in his hand within the 1<sup>st</sup> 2 weeks but this becomes much easier when the splint is applied. I like my patients to elevate the hand for 24 to 48 hours after the surgery and this simply involves putting the hand on a cushion when sitting quietly or keeping their hand at shoulder height when walking about.

A good result is usual but common causes for disappointment include persistent tenderness around the scar, altered sensation in the digit, a recurrence of the contracture and generalized stiffness and swelling in the hand.

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