East Sussex MSK Community Partnership

Patient Information – Dupytrens Contracture

This leaflet is intended to provide information about Dupuytren's contracture.

It will allow you to consider which treatment option is right for you, and how to proceed with this choice of treatment.

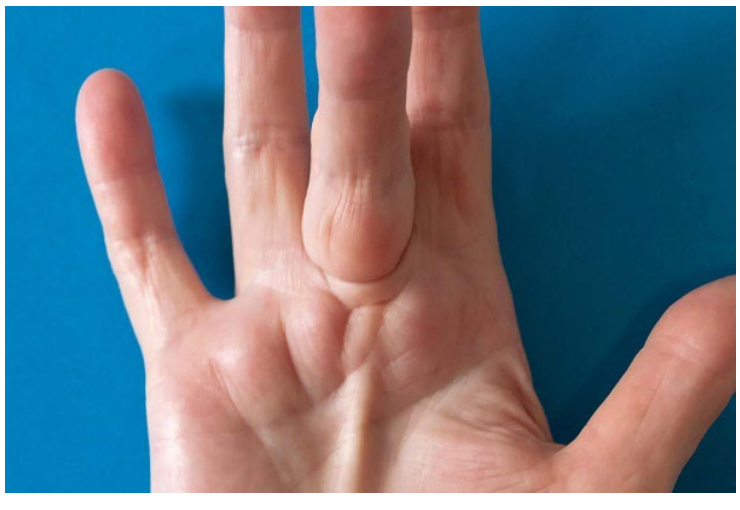
What is Dupuytren's Contracture?

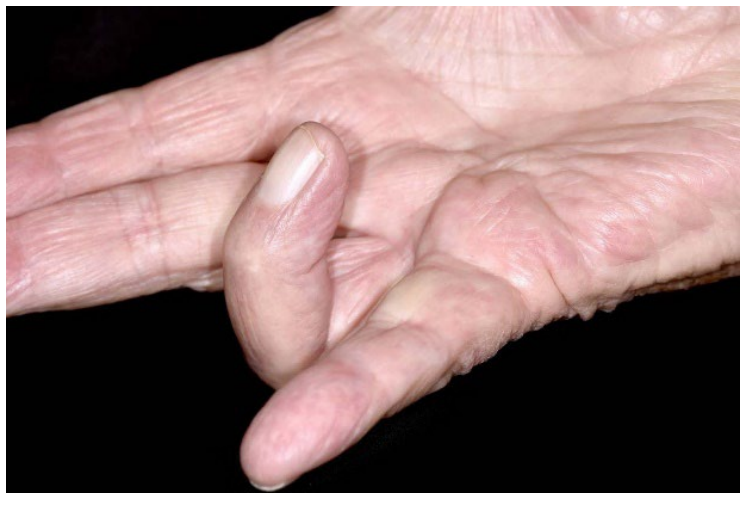
Dupuytren's contracture is a problem in your hand involving a structure called your fascia, which is a type of soft tissue.

This tissue can form:

- Small hard lumps (noduled)
- Tight strings (cords)

These can pull your finger down towards your palm, making it harder to straighten, which can affect how you use your hand.





*(pictures taken from: **Dupuytren's contracture - NHS**)*

What does it feel like?

Usually, it doesn't cause pain

- Your hand can feel tight or stiff
- It may feel uncomfortable if you press or try to stretch it a lot.

What causes it?

- It is not typically caused by how you use your hands
- It can run in your family (genetic cause)
- It may be linked to other reasons:
  - Diabetes
  - Excessive alcohol intake

Do I need treatment?

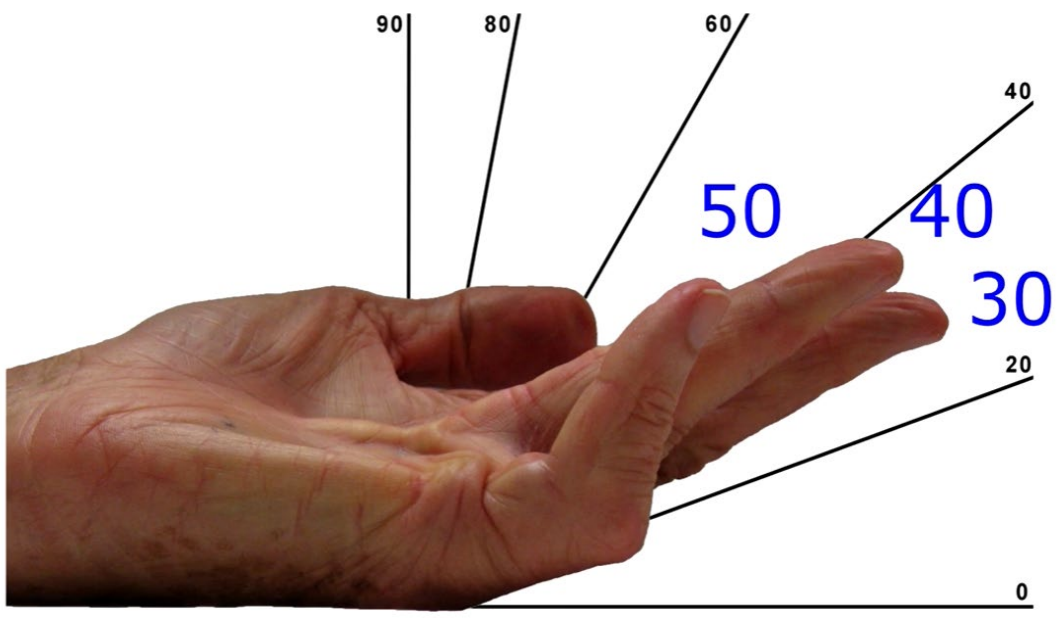
- Not always
- Many people live with it without having treatment
- Symptoms can often stay the same

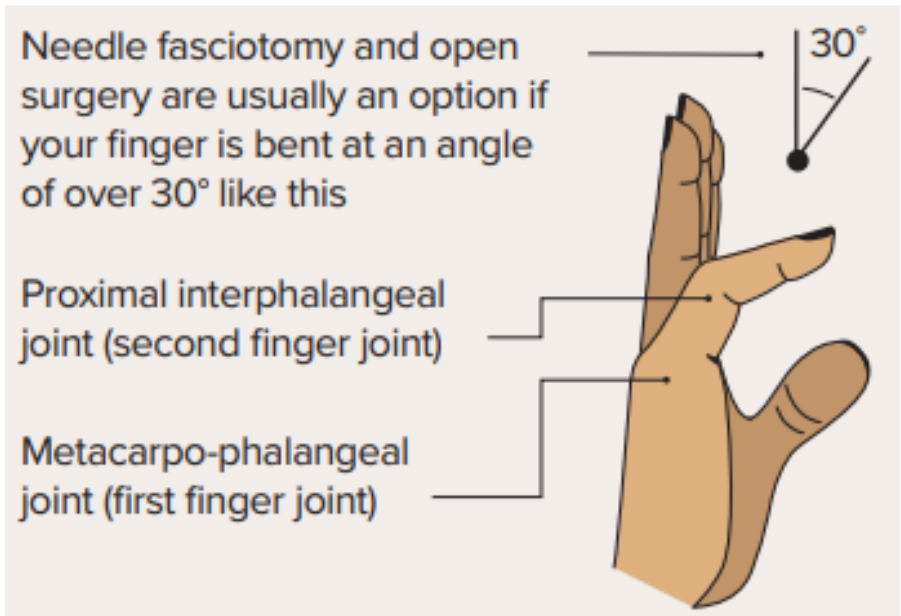
Simple (non-surgical) options:

- Change how you do things to avoid a lot of pressure on it
    - Use padded gloves for things like gardening
    - Add padding to things like bike handles
- Avoid:
    - Stretching
    - Massaging
    - Splints don't usually help

Pain relief:

- If your finger is bent to a certain angle on the knuckle joint (metacarpophalangeal joint) or middle joint of your finger (proximal interphalangeal joint)
    - Knuckle joint bent to at least a 30° angle
    - Middle joint bent to at least a 20°
- The finger is bent at those joints to a specific angle, and it is affecting your ability to use the hand well
- The pictures below should help you work out roughly how bent your finger is in degrees.





*(pictures taken from: **NHS decision making aid**)*

Types of procedures:

The type of procedure most suitable for you will be discussed with you during your appointment with the Orthopaedic consultant.

1. Needle treatment (needle fasciotomy)
    a. A needle is used to break up the tight cord
    b. Can help slow the problem in very specific cases where there is just a simple string (cord)
    c. Does not cure it/get rid of it
    d. This treatment is not very common
2. Surgery (fasciectomy)
    a. The tight tissue is cut out

   b. Most common treatment
   c. The problem can come back (especially in the first five years)
3. Surgery with skin graft (dermofasciectomy)
   a. Used when there is not enough skin to close the wound
   b. Skin is commonly taken from your forearm to help close the wound
   c. Not needed in most cases

The type of procedure you may have will be decided with you and your surgeon

How long will I be in hospital?

- Usually, you go home the same day
- Someone should take you home and stay with you overnight

Will I have an anaesthetic?

- The doctor who gives you your anaesthetics will talk to you before your operation
- They will help you choose what is best for you
- Sometimes you will be asleep for the surgery or they might just make the area numb so you don't feel it

Don't:

- Lift heavy things for 4-6 weeks (examples: saucepan, kettle, iron)

Do:

- Start light activities once healing starts and when the doctor doing your surgery says it is OK for you to do it

Follow up care

- You will have an appointment to check your hand
- A therapist may help with movement

Contact your doctor (GP) if:

- Your wound is very painful
- It smells
- It looks infected

Getting back to normal

Hobbies

- Swimming: after 2-4 weeks (when the wound is healed and you are not in a cast)
- Light gardening: after 4-6 weeks (no heavy lifting or pulling for 2-3 months)
- Other sports - after 6-8 weeks (examples: bowls, golf, tennis, squash, badminton)

Work

- Light work: 2-3 weeks
- Heavy work: 2-3 months

Driving

- Usually after 4-8 weeks
- When your hand is healed and you can move it well
- Only when you are safe to drive

Risks of treatment

All treatments have some risks

- Stiffness and swelling
- Infection
- Numbness or problems with the nerves
- It might come back

Benefits of treatment

- Should help straighten your fingers
- Should improve how you use your hand

Your choice

You can choose to

- Manage it yourself (no treatment)
- Consider surgery if you meet the criteria (see page 2- When is surgery considered?)

What now?

This leaflet gives you information about Dupuytren's contracture and your options

Once you have this leaflet we give you 12 months to think about your options

If you meet surgery criteria and want to be seen for surgery, you can contact us for an appointment

- Contact the admin team who will review your request and refer you onto one of the surgeons
- We cannot guarantee surgery as this a choice between you and your surgeon.
    - Tel: 0300 131 5225 or Email:
        - For patients living in: High Wealds, Lewes and Havens or Eastbourne, Hailsham and Seaford areas: esht.esmskcontact@nhs.net
        - For patients living in: Hastings and Rother areas: esht.esmskhelp@nhs.net

I missed the 12 months and now want surgery - what now?

Contact your GP for a new referral

Consent

You can say yes to the option of surgery, but you can change your mind at any time before surgery. If you change your mind, talk to your medical team.

Important informaion

This leaflet gives general advice to help you understand the hand condition and your options and the criteria for surgery.

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

Reference

The following clinicians have been consulted and agreed this patient information:

The directorate group that have agreed this patient information leaflet:

- CHIC Governance Group

Next review date: (leave blank)

Responsible clinician/author: (the person who will co-ordinate the review + job title)