

Dupuytren's contracture



Information for guided patient management

Provided by

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What is Dupuytren's contracture?

Dupuytrens is a hand deformity which develops over time and ultimately causes a thickening of the soft tissue in the palm of the hand. This is a genetic condition and usually starts with a small area and a 'nodule' usually forms under the skin of the palm. Nodules associated with Dupuytrens are not cancerous and can initially be tender to touch.

In the early stages, there may be no restrictions in individual fingers but as the condition progresses, the soft tissue bands thicken and this causes the affected fingers to bend and prevents you from straightening them.

Treatment of Dupuytren's contracture

Initial management is to try and prevent the fingers from progressing into a fixed position. This may be through stretching of the hands/fingers regularly and trying to put them flat against a table. Physiotherapy, acupuncture and massage are not effective in the management of this condition. Surgical intervention is the only effective treatment to remove as much of the Dupuytrens tissue as possible and the aim is to optimise hand function. It is only conducted when the condition is clinically characterised as moderate or severe; mild Dupuytrens is not suitable for surgical intervention.

Approximately 40% of people will have a recurrence following surgery and the contracture can return to the same place on the hand or may reappear somewhere else. Recurrence is more likely in younger people, when the contracture was severe at the time of surgery or if there is a strong family history of the condition. The condition is also more likely to recur, if the contracture significantly affected the proximal interphalangeal joint (middle finger joint/lower knuckle).

The two most common types of surgical procedures are either needle fasciotomy or Dupuytrens fasciectomy:

Needle fasciotomy is the least invasive of the two, as a needle is used in attempt to straighten the affected fingers. The needle is inserted into several places along the palm and finger to loosen the Dupuytrens tissue. Although this procedure is less invasive and is associated with quicker recovery time (two weeks), the Dupuytrens tissue is not removed and there is a higher risk of the contracture re-occuring.

Dupuytrens fasciectomy involves the surgeon making a cut along the palm of the hand and finger to remove as much tissue as possible and to enable the finger straightening by removing the Dupuytrens tissue. This procedure is more invasive and therefore has a longer recovery time (4-12 weeks). Although there is always a risk of the contracture re-occurring, the risk is lower compared to needle fasciotomy.

What are the symptoms of Dupuytrens?

Over time Dupuytren's contracture can cause one or more fingers to bend towards the palm of your hand, and the connective tissues in the palm to thicken and cause a cord-like a rope in the palm. Similar cords/bands can also extend into the fingers.

- It mainly affects the ring and little fingers
- · You can have it in both hands at the same time
- It gets slowly worse over time
- At the early stages, it begins with lumps or ridges on your palms
- Eventually, your fingers bend in towards the palm
- It can affect other parts of your body in its more aggressive types

What is Dupuytren's contracture release surgery?

Surgical release is the most common form of treatment although other forms of treatment include needle release or injection. A surgical release involves removing the thickened bands, Dupuytren's tissue (all or a part of it) and straightening the affected digit (finger). This is carried out mostly under general anaesthesia or a regional block.

Injection involves a drug called Xiapex. Xiapex is injected directly into the cord of connective tissue, dissolving it and allowing a doctor to manually straighten the affected digits. The injection does not need general or regional anaesthetic, but a local anaesthetic is applied for the manipulation.

The type of treatment you will receive will be decided after discussion with your consultant surgeon.

How long does Dupuytren's contracture repair take?

Surgical time varies according to complexity but usually lasts between 45 and 90 minutes. Recovery times for surgery can take between four and 12 weeks and for a Xiapex injection, it is typically a fortnight. Both methods are carried out as day surgery, which means you will go home on the day of your procedure and you do not need to stay in hospital overnight.

How successful is Dupuytren's surgery and treatment?

Both surgery and injection have good results, although in some cases over time the procedure may need to be repeated. For Xiapex, 92% of patients in the UK who have had the procedure say they were 'very satisfied' or 'quite satisfied' with the results but the re-occurrence rate at five years is higher for injection compared to a surgical release.

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