

Dupuytren's Fasciectomy

What is Dupuytren's Disease?

Dupuytren's disease is a **progressive condition** where **scar-like fibrous tissue** forms just beneath the skin of your fingers and the palm of your hand. It mainly affects the **ring and little fingers**.

Over time, this fibrous tissue can **contract**, pulling one or more fingers into a **bent position**. This condition is called **Dupuytren's contracture**, and it can make it difficult to **straighten your fingers** or perform everyday tasks.

Your surgeon has suggested a **Dupuytren's fasciectomy**—a surgical procedure to remove the thickened tissue and improve finger movement. However, it is your decision whether or not to proceed with the operation.

Making an Informed Decision

This document provides essential information on:

- **The benefits of surgery**
- **Potential risks and complications**
- **Alternative treatment options**

If you have any **unanswered questions**, it is important to discuss them with your surgeon or the healthcare team before making your final decision.

Once all your questions have been addressed and you **feel ready to proceed**, you will be asked to sign the **informed consent form**—the final step in the decision-making process.

However, **you can still change your mind at any time** before the operation.



How Does Dupuytren's Contracture Develop?

The **exact cause** of Dupuytren's contracture is **not fully understood**. However, it is known that **fibrous nodes and bands of tissue** gradually form beneath the skin, leading to progressive contracture of the fingers.

- **Who is at risk?**
Dupuytren's contracture is **more common in men over the age of 50** than in women and often **runs in families**.
- **Possible contributing factors:**
 - Diabetes
 - Alcohol consumption
 - Liver disease
 - Smoking

For **most people**, however, **no specific cause** is identified.

If one or more of your fingers develop contractures, your surgeon may recommend an operation to **restore function and mobility**.

What Are the Benefits of Surgery?

- Surgery should **improve finger movement** and **restore hand function**.
- You should be able to **straighten the affected fingers more** and use your hand for daily activities with greater ease.

Are There Alternatives to Surgery?

- **Needle Aponeurotomy:**
This is a minimally invasive procedure where a **needle is used** to cut the fibrous bands in your hand under **local anaesthetic**, avoiding a large incision. However, there is a **high risk of recurrence (85 in 100 cases)**.
- **Splints or Braces:**
Wearing a splint on the affected hand **does not stop the disease from progressing**.

The **most effective treatment** is surgery. Your choice of procedure will depend on:

- ✓ The **severity of your symptoms**
- ✓ Any **other health conditions** you may have

What Happens If I Decide Not to Have Surgery?

- Surgery is **not essential** but **Dupuytren's contracture will not improve on its own**.
- The condition will often **worsen over time**, eventually causing one or more fingers to remain **permanently bent** into the palm.
- If left untreated, the **finger joints may become permanently stiff**, making surgery less effective later on.
- In severe cases, **amputation** may be the only option for a completely stiff and contracted finger.

What Does the Operation Involve?

- 1. Before the Procedure:**
 - Remove any **rings** from your affected hand before coming to the hospital.
 - The **healthcare team** will carry out **pre-surgical checks** to ensure the correct procedure is performed on the correct hand.
- 2. During the Procedure:**
 - The **extent of surgery** will depend on:
 - The **position and severity** of the contracture
 - The **condition of your skin**
 - Any **previous surgeries** you may have had
 - The operation may range from:
 - **Simply cutting the fibrous band in your palm**
 - **Removing all affected skin and replacing it with a skin graft**
- 3. Anaesthesia Options:**
 - Your anaesthetist will discuss **different anaesthetic techniques** with you.
 - You may also receive **local anaesthetic injections** to help with **pain control** after the operation.
- 4. Post-Surgery:**
 - Your surgeon will **close the wound with stitches** (which may be dissolvable).
 - A **bandage or cast** will be placed on your hand to support healing.
 - You may receive **antibiotics** during the operation to **reduce the risk of infection**.

What Should I Do About My Medication?

Ensure that your **healthcare team** is aware of **all the medications you take** and follow their guidance. This includes:

- ✓ **Prescription medications**, especially **blood-thinning medication**
- ✓ **Over-the-counter drugs**
- ✓ **Herbal and complementary remedies**
- ✓ **Dietary supplements**

How Can I Prepare for the Operation?

Taking certain steps before surgery can help **reduce the risk of complications** and **improve your recovery**.

- **Stop Smoking:**
 - If you smoke, quitting now can **lower the risk of complications** and improve **long-term health**.
- **Maintain a Healthy Weight:**
 - Being overweight **increases the risk of complications**.
- **Exercise Regularly:**
 - Staying active before surgery can **help with recovery** and **improve overall health**.
 - Always consult your **GP or the healthcare team** before starting any new exercise routine.

Reduce the Risk of Infection

To minimize the chance of infection in your **surgical wound**, follow these guidelines:

- ✓ **Take a bath or shower** the day before or on the day of the operation.
- ✓ **Keep warm** before and after surgery – inform the healthcare team if you feel cold.
- ✓ **Manage diabetes carefully** – keep your **blood sugar levels controlled** around the time of the procedure.

Hospital Preparation

- ✓ Speak to your **healthcare team** about any **vaccinations** you might need to **reduce the risk of infections** while recovering.
- ✓ When in hospital, **practice hand washing** and **wear a face covering** when required.

What Complications Can Happen?

The healthcare team will take **every precaution** to minimize **risks and complications**.

- **How common are complications?**
The likelihood of complications is based on studies of people who have had this procedure.
- **Who is at higher risk?**
Some risks increase if you:
 - Are **older**
 - Are **obese**
 - **Smoke**
 - Have **diabetes, heart disease, or lung disease**

Some complications **can be serious**. You should ask your doctor **if anything is unclear**. Your **anaesthetist** will discuss the possible risks of **anaesthesia** with you.

General Complications of Any Surgery

- **Bleeding after the operation**
 - This risk is **lower** if you **keep your hand raised** after surgery.
- **Infection of the wound (risk: 1 in 40)**
 - You can usually **shower after 2 days**, but keep your wound **dry and covered**.
 - Contact your healthcare team if you experience:
 - **High temperature (fever)**
 - **Pus or discharge from the wound**
 - **Redness, pain, or swelling around the wound**
 - Most infections **settle with antibiotics**, but some cases may require:
 - **Special dressings**
 - **Extended wound healing time**
 - **Another operation** (in rare cases)
 - **Do not take antibiotics** unless prescribed by your doctor.
- **Allergic reaction**
 - Reactions can occur to **equipment, materials, or medication**.
 - The **healthcare team** is trained to **detect and treat allergic reactions**.
 - Inform your doctor if you **have any known allergies** or **previous reactions** to medication, dressings, or tests.
- **Chest infection**
 - The risk is **lower** if:
 - You have **stopped smoking**.
 - You have been **free from Covid-19 symptoms** for at least **7 weeks** before surgery.

Dupuytren's Fasciectomy: Procedure and Recovery Guide

Specific Complications of This Operation

- **Injury to an artery in your finger (risk: 1 in 50)**

- If both main arteries are damaged, **finger loss is possible** but very rare.
- **Incomplete correction of the Dupuytren's contracture**
 - If the **finger joints have lost movement**, complete correction may not be possible.
 - Your **surgeon will discuss expectations** before surgery.
- **Return of Dupuytren's disease (risk: 1 in 4 within 5 years)**
 - The **risk is lower** if a **skin graft** is used.
 - You **may need another operation** in the future.
- **Stiffness of finger joints (risk: 1 in 25)**
 - Higher risk if you have **arthritis** in your fingers.
- **Damage to nerves (risk: 1 in 100)**
 - The **small nerves in your fingers** may be affected as they **pass near the fibrous tissue**.
 - This usually improves over time, but you **may not fully regain normal sensation**.
- **Numbness in the fingers**
 - Common after surgery and **usually improves after 6 weeks**.
 - In some cases, numbness can be **permanent (risk: 1 in 100)**, and fingers may become **sensitive to cold**.
- **Wound healing problems**
 - More common if your skin is **thick or tough**.
 - Wounds may remain **sticky for 1-2 weeks**.
 - In rare cases (**risk: 1 in 25**), a **small area of skin may die**, but wounds usually heal well.
- **Severe pain, stiffness, and loss of hand function (Complex Regional Pain Syndrome - CRPS)**
 - The **cause is unknown**, and **further treatment** (painkillers, physiotherapy) may be needed.
 - The hand can take **months or years** to improve, and some people experience **permanent pain and stiffness**.
 - You may be able to **reduce this risk** by taking a **vitamin C tablet daily for 6 weeks** after surgery—discuss this with your doctor.

Consequences of This Procedure

- **Pain**
 - The healthcare team will **provide medication** to manage discomfort.
- **Scarring of the skin**
 - If a **skin graft is needed**, the grafted area will always look **slightly different** from normal skin.

How Soon Will I Recover?

In Hospital

- After the operation, you will be transferred to the **recovery area** and then to the **ward**.
- Keep your **hand raised** in a sling or **on a pillow** when lying down.
- The healthcare team will inform you about **stitch removal and dressing changes**.
- Keep the **dressing dry** when having a bath or shower.
- Most patients **go home the same day**, but your doctor may recommend **staying longer**.
- If you have **any concerns**, either in the **hospital or at home**, contact the healthcare team—they can reassure you or **treat any complications early**.

Returning to Normal Activities

If you had **sedation or general anaesthesia** and you are discharged the same day:

- A **responsible adult** should take you home in a **car or taxi** and stay with you for at least **24 hours**.
- Stay **near a phone** in case of emergency.
- **Do not drive, operate machinery, cook, or sign legal documents** for at least **24 hours** or until full recovery.
- **Avoid alcohol** for at least 24 hours.

Follow-Up Care and Rehabilitation

- The **healthcare team** will tell you when you can **return to normal activities**.
- They will arrange for you to **return to the clinic** to monitor wound healing.
- Your **surgeon may recommend**:
 - A **splint** to wear at night.
 - **Physiotherapy** to improve finger movement.
- **Hand exercises** shown by the physiotherapist are **important** for the best outcome.
- It is **also important** to gently **exercise your shoulder and elbow** to prevent stiffness.

Driving and Physical Activities

- **Do not drive** or ride a bike until you can **fully control your vehicle**, including in an emergency.
- **Check with your insurance provider** and consult the healthcare team before resuming driving.

The Future

- Your **hand may take time to settle**, and **mild stiffness is common**.
- **Scars may feel thick initially** but will improve over time.
- **Dupuytren's contracture may return**, requiring **further treatment**.

Summary

- A **Dupuytren's fasciectomy** can **straighten your fingers** and improve **hand function**.
- Surgery is **usually safe and effective**, but **complications are possible**.
- Understanding **risks and benefits** will help you make an **informed decision**.
- Keep this document for **future reference** and **consult your healthcare team** if needed.

This information is based on **global studies and medical databases**. Your **surgeon** or **doctor** can provide specific details about your **risks and other treatment options**.

This document is **for informational purposes only** and does not replace professional medical advice.

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