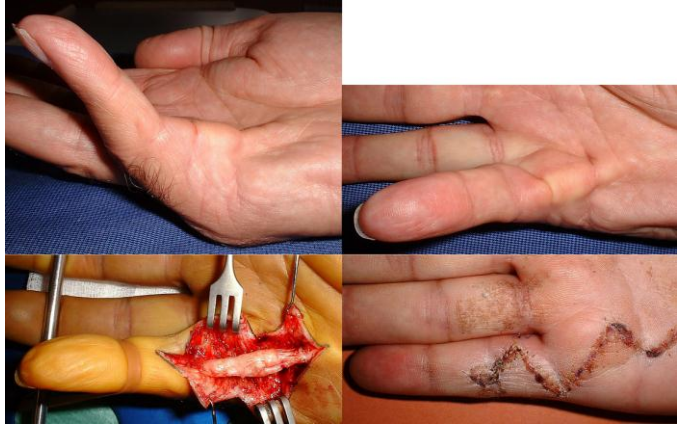


FASCIECTOMY

Your Dupuytren's contracture will be corrected by removal of the abnormal fascia and relaxation of the overlying skin.

The operation is often performed under general anaesthetic. Local anaesthetic is often injected around the cut at the end of the operation. This area and possibly some of the fingers will remain numb for up to ten hours after surgery. Hand elevation is important to prevent swelling and stiffness of the fingers. Please remember not to walk with your hand dangling, or to sit with your hand held in your lap.



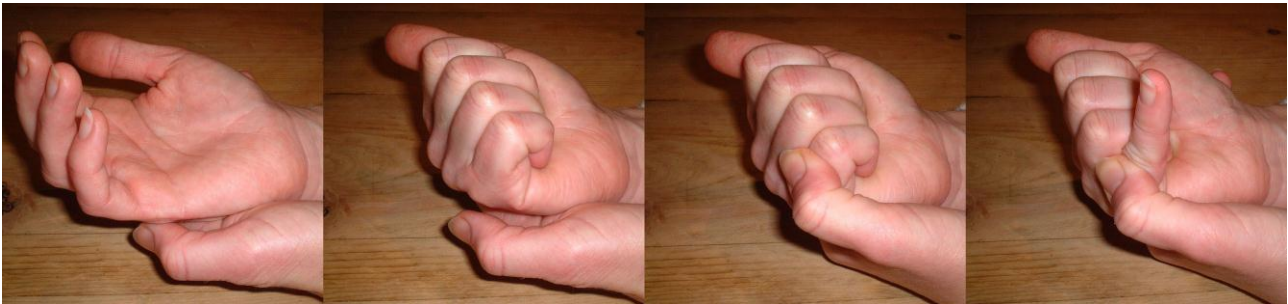
You will be initially placed in a bulky dressing including a splint to position and rest the hand. The dressing will be removed after 1-5 days and then be left open at this stage, if possible, to allow mobilisation of the fingers. There obviously will be some swelling and bruising. Look out for any redness or tenderness in the area around the wound that might indicate an infection. Do not apply antiseptic but please contact my secretary if you have any worries. Once dressings are removed, it is safe to get the hand wet in a bath or shower. The wound and the surrounding skin can become dry and if this occurs, briefly immerse the whole hand in water to which a small quantity of baby-oil has been added. Moisturisers (e.g. E45, Diprobase creams) can be used on the hand but avoid rubbing them directly into the wound at this stage..

At this time, you will see the Hand Therapist who will teach you your exercises and fit you with a splint. The splint is to be worn at night for twelve weeks to keep the finger straight. We use different types of rehabilitation depending on how bent the finger was and which joint was most affected. You will be told by the therapist which group you are in and then shown your exercises.

A. No splinting The hand should be exercised and you should perform normal light activities.

B. Night The splint is only worn at night and the hand moved and used in the day.

C. Almost always The splint worn during the day except when you perform exercises four times/day. After 1-2 weeks you will probably be converted to group B.



The diagrams show the most effective way of recovering finger movements. By first bending the knuckle joint, finger extension can be achieved more efficiently and without stretching the scar.

Usually the entire wound is stitched up in a zigzag manner but occasionally, a segment of the wound is not stitched, being left open to heal by itself (open-palm technique). This usually requires dressings to be applied to the palm for 2-3 weeks whilst mobilisation is performed in the usual way.

Your stitches will be removed at about two weeks after the operation. Once healed, the scar may become lumpy, firm, tender and pink, which can be helped by massaging the scar and surrounding area firmly with the moisturizing cream.

You can usually drive a car after three weeks as long as you are comfortable and have regained good finger movements. Timing of your return to work is variable according to your occupation and you should discuss this.