

ULNAR HEAD EXCISION (DARRACH)

The forearm has two bones, the radius and ulna. These two bones are joined to the hand at the wrist joint. They are also held together at each end by joints which allow the radius bone to rotate around the ulna.

Rheumatoid arthritis can damage the lower of these joints causing the ulna to come out of joint. This causes the painful lump on the back of your wrist and prevents you rotating your hand fully without pain. Your finger tendons can wear away because they are continuously rubbing against the end of the ulna bone.

The end of your ulna bone has therefore been removed to (i) remove the painful lump, (ii) improve forearm rotation and (iii) protect your tendons. This operation is often combined with removing inflammation around the tendons (synovectomy) and repair of any damaged tendons.

Local anaesthetic has been injected around the site of operation and therefore this area may remain numb for up to ten hours after surgery. As this effect wears off, it may well be worth taking some pain killers.

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.

Hand movement should be continued and you should perform normal light activities during the post-operative period. You should particularly practice rotating your forearm.

You have been discharged with a bulky dressing, consisting of gauze, wool and a crepe bandage. Please remove the entire dressing after 72 hours and inspect the wound. There obviously will be some swelling and bruising. Look out for any redness or tenderness in the area around the wound which might indicate an infection. Do not apply antiseptic. Please contact my secretary if you have any worries.

At this stage it is safe to get the hand wet in a bath or shower. The wound and the surrounding skin often become very dry and will be more comfortable if a moisturizer is applied, including the wound itself (e.g. E45 and Diprobase Creams).

You can drive a car after 4 weeks as long as you are comfortable and have regained full finger movements. Timing of your return to work is variable according to your occupation and you should discuss this.

Your stitches will be removed about 2 weeks after the operation. Following this the scar will be somewhat firm to touch and tender. This can be helped by massaging the area firmly with the moisturizing cream.

The soreness in the wrist area and discomfort during forearm movement will take 3 to 6 months to settle.

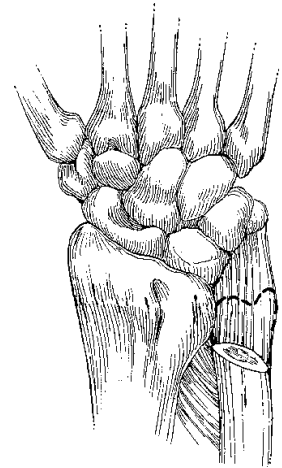
Infection Any operation can be followed by infection and this would be treated with antibiotics.

Scar You will have a scar on back of the wrist. This will be somewhat firm to touch and tender for 6-8 weeks. This can be helped by massaging the area firmly with the moisturizing cream.

Clicking You may experience a clicking sensation during rotation of the forearm. This can persist but usually is nothing more than a minor irritation.

Stiffness About 5% (1 in 20) of people are sensitive to hand surgery and their hand may become swollen, painful and stiff after any operation (algodystrophy). This problem cannot be predicted but will be watched for afterwards and treated with physiotherapy.

Nerve A small nerve running in the region can be damaged during the surgery and form a painful spot in the scar (neuroma) or a small area of numbness in the region. This complication is very rare but may require a further operation to correct.



Pro-supination

