

Further information

If you require any further information after reading this leaflet, please contact:

Occupational Therapy Service
Warwick Hospital
Lakin Road
Warwick
CV34 5BW
Tel no: 01926 600818 option 5

References: [http://www.nhs.uk/Conditions/Dupuytren's-
contracture/Pages/Introduction.aspx](http://www.nhs.uk/Conditions/Dupuytren's-contracture/Pages/Introduction.aspx)

Author: Advanced Occupational Therapist.

As a key provider of healthcare and as an employer, the Trust has a statutory obligation to promote and respect equality and human rights. This is set out in various pieces of legislation including: Race Relations (Amendment) Act 2000, Disability Discrimination Act (2005), Sex Discrimination Act (1975) and the Age Discrimination Act (2006)

Our information for patients can also be made available in other languages, Braille, audio tape, disc or in large print

We offer a Patient Advice Liaison Service (PALS). This is a confidential service for patients and their families to help with any questions or concerns about local health services.

You can contact the service by the direct telephone line on 01926 600054 or using the phone links which are available in both hospitals or calling in at the office located in the main entrance at Warwick hospital.

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South Warwickshire NHS Foundation Trust

OCCUPATIONAL THERAPY

Hand and Upper Limb Service

Dupuytren's Disease

Patient Information

SWH-00334

What is Dupuytren's disease?

Dupuytren's disease is a benign (non-fatal), incurable condition that affects the hands. It most commonly affects the little or ring finger first, but can progress to affect all fingers and sometimes the thumb. It can affect one or both hands.

The palm of the hand contains a tough, fibrous layer called the "**palmar fascia**", which covers the nerves, muscles and tendons.

The disease typically starts with a small nodule (lump) in the palm. Eventually cords or bands of tissue develop and in progressed stages of the disease the affected fingers cannot be stretched anymore, resulting in what is known as "**Dupuytren's contracture**".

As a result, the affected fingers are pulled down into the palm and cannot be straightened.



How is Dupuytren's disease treated?

At present, there is no non-surgical treatment for Dupuytren's. The following are the most common surgeries performed:

- **Fasciotomy (Needle/Open)**; involves cutting the cord.
- **Fasciectomy**: involves removing the thickened connective tissue there are three variations of the procedure.
- **Regional Fasciectomy**: affected tissue is removed through a single incision.
- **Selective Fasciectomy**: one or more cuts are made in the hand.
- **Dermofasciectomy**: affected tissue and skin are removed. The wound is then sealed with a skin graft.

What happens after I've had my surgery?

After surgery you will be seen by a hand therapist and have a follow up appointment with the consultant. An appointment will be given in day surgery or posted to your home address.

What happens when I attend Occupational Therapy?

Depending on your requirements the occupational therapist can help with the following

- Wound Management
- Scar Management
- Splinting
- Exercise Programme
- Oedema Management (Swelling)
- Resensitisation
- Strengthening

Why and when do I need to wear a splint?

A splint helps to maintain the straightness of the fingers that have been operated on while your wounds heal.

Fasciotomy – The splint will be worn at nighttime only. It is recommended that you wear your splint for 4-6 months after surgery.

Fasciectomy – Until removal of stitches the splint must be worn at all times unless you are completing your exercises. Then will be worn at nighttime for 4-6 months.

You may also remove the splint to have a shower or bath, but it is **very important that you keep the dressings dry** and replace your splint afterwards. If you get the dressings wet you are at a higher risk of developing an infection in your wound.