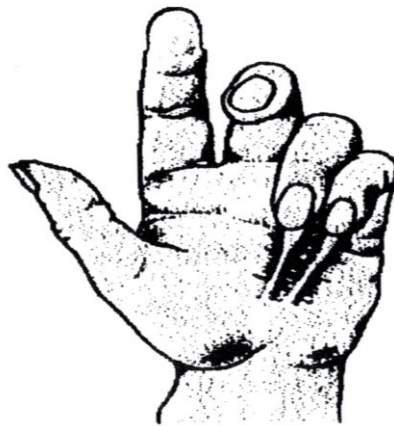


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FROM THE ELBOW TO THE FINGERTIP
PurdyHandAZ.com

Dupuytren's Contracture

What is Dupuytren's Disease?

Dupuytren's disease is a thickening of the tissue just beneath the skin of the palm and fingers. The tendons, nerves and muscles are not diseased, but the skin can be involved with the contracting fibers. In established cases, a cord forms beneath the skin that extends from the palm into one or more fingers, drawing the fingers into the hand. Finger motion is restricted as further shrinkage occurs. As the disease worsens, there is a slow progression of the contracture. Having the disease in both hands is common.



What Causes Dupuytren's Disease?

While the exact cause remains unknown, recent studies have shown an inherited tendency. The disease occurs most often in white males of northern European descent. Women will develop the disease much less frequently. It appears rarely in Blacks and Asians. Severe causes can appear in people who develop the disease at an early age, have a history of liver disease, or take medications to stop seizures. The soles of the feet as well as the hands may be involved. People with sedentary occupations have the disease as often as manual laborers. Injuries to the hands do not cause the disease, but can cause it to appear or progress.

What are the signs and symptoms of Dupuytren's disease?

The disease usually starts as a pit or a lump in the palm. In time a band or cord may develop in the palm and extend into the fingers. In advanced cases the finger is drawn to the palm and the person is unable to place the palm on a flat surface. Drawing of the fingers may interfere with daily activities as wearing gloves and putting hands in pockets. The disease is usually not painful.

What can be done for it?

The existence of a lump in the palm does not mean that surgery is required. However, surgery will be needed if the contracture interferes with the use of your hand. Neither stretching, steroid injections, or splinting will prevent the progress of the disease. There is no permanent cure for the disease.

If surgery is needed, what is involved?

Your surgery can be done in the hospital as an out-patient procedure. A splint with a bulky dressing will be worn for the first 2-3 days, at which time therapy begins. A tremendous commitment to mobilization of your hand is imperative to maximize the outcome. Sutures will remain for approximately 14 days.

What complications can occur and how can they be minimized?

Joint stiffness is counteracted with splints and exercises. Swelling can be prevented by keeping your hand elevated above your heart level. A hematoma may occur if blood collects in the palm area even after careful surgery. The palm incision is often left open to prevent this. The disease process may recur or a new area of the hand may become affected, but repeat surgery is rarely necessary.

What are the results of surgery?

For most patients, the tightness of the hand is relieved and the natural progression of the disease is counteracted. A long period of exercise may be necessary.

Xiaflex Injections

Some Dupuytren's cords can be treated with Xiaflex injection, avoiding the need for surgery. Xiaflex is an enzyme which consumes the collagen that forms the cord. The location of the cord relative to other collagen structures (tendons or ligaments) determines whether the injection can be safely used. Excellent information about Xiaflex can be found on Xiaflex.com.