

Dupuytren's contracture



What is it?

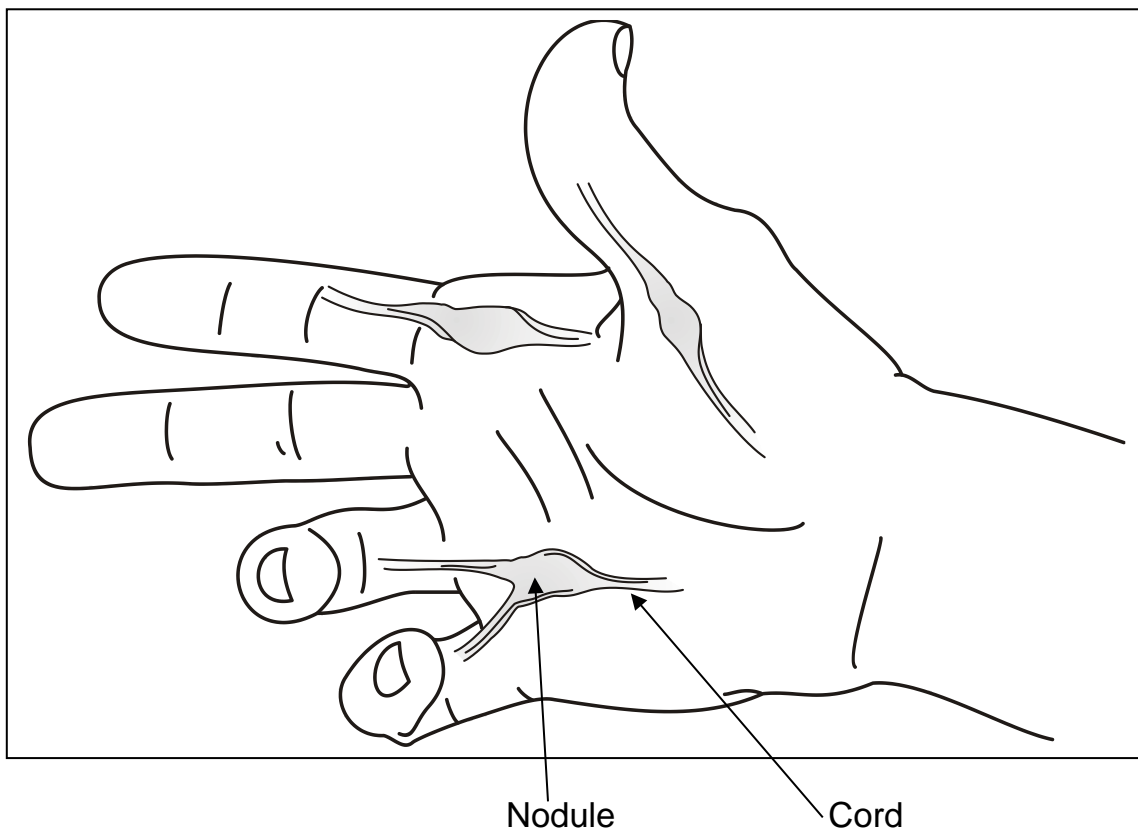
Dupuytren's (pronounced DOO-puh-trens) contracture, also called Dupuytren's disease, is too much thickening of the fascia in the palms of the hands and sometimes the soles of the feet. The fascia is a tough layer of tissue just below the skin that protects the tendons underneath.

In Dupuytren's contracture, the tissue becomes thickened, and can even form extra bands that start to pull on the tendons and nerves. This gradually pulls the fingers down towards the palm so that they can no longer be straightened. It usually does not cause pain.

What causes it?

We do not know the cause of Dupuytren's contracture. It may run in families. It mostly affects people with a Northern Europe background. It occurs more often in men than women, and usually starts after age 40.

Dupuytren's contracture usually develops slowly. It is often first noticed as a small lump or pit in the palm, usually near the crease of the hand. Over time, a cord may develop between the palm and the fingers. The most common fingers to be affected are the ring and small fingers, followed by the thumb, but any or all of the fingers can be involved. It is also common to see the changes in both hands.



In more severe cases, you may notice thick pads over the back of the knuckles.

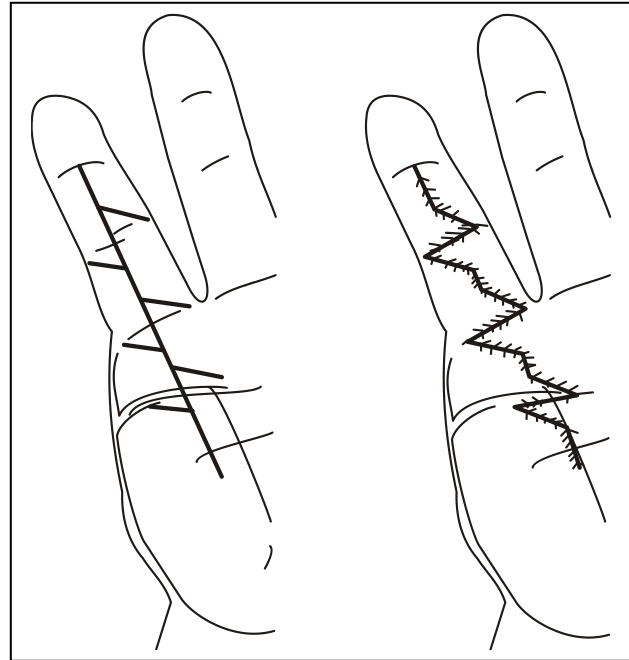
What can help?

There are no medications to help Dupuytren's contracture. There is a lot of research going on, so we hope that new treatments become available in the next 10 years.

The most common treatment is surgery to remove the tissue. This surgery is called a fasciectomy, and is usually done by a plastic surgeon.

The surgery may take several hours, as the surgeon needs to work very carefully around the many tendons, nerves and blood vessels.

The surgeon will usually make a zig-zag cut down the finger and into the palm. This may need a lot of stitches, but it helps the skin to lengthen and heal well.



Fasciectomy

After surgery you will have a thick dressing to cover the wound for a week or so. Your doctor will refer you for hand therapy, which may include:

- wearing a splint at night for 6 to 8 weeks after surgery
- exercises to improve movement and strength
- scar healing and scar management (use of massage, ultrasound)

Because the finger has often been bent for so long before surgery your progress may be slow. It is very important to stick with the therapy to see the best result.

How successful is the treatment?

Surgery improves the ability of the finger to both bend and straighten, but it is not a cure. Depending on how severe the problem is, it may come back over time, and/or the fingers may never fully strengthen. If you also have arthritis, this may make it more difficult to get rid of the stiffness.

If you have any questions please ask your doctor or therapist.

To learn more, visit:

www.eatonhand.com (then click on dupuytren's on the menu bar). This site has very detailed information on new procedures as well as dupuytren's facts.

www.med.und.nodak.edu/users/jwhiting/handmain.htm

www.orthosports.com.au/hand_dupuytren.html

www.mayoclinic.com (then select "D" on the "Find it fast" menu, dupuytren's contracture is near the bottom of the list).

Hamilton Hand Interest Group, 2006.