

Dupuytren's disease is a condition where fibrous, scar-like tissue forms beneath the skin on the fingers and palm of the hand. It can cause the fingers to curl up into the palm (known as Dupuytren's contracture).

The cause of Dupuytren's disease is not fully understood, however it is found to be more common in men than women and tends to run in families. Dupuytren's can be associated with diabetes, liver disease and smoking, however for most people there is no particular cause.

Benefits of Xiaflex treatment are the better use of the hand and increased ability to straighten the fingers. The disease will not improve without treatment. The condition will often progress over time and can result in one or more fingers being bent into the palm.

## Alternative options to Xiaflex

**Needle aponeurotomy** involves cutting the fibrous bands in the hand using a needle and local anaesthetic, the benefit being avoidance of a larger incision in the skin. This procedure results in a much higher risk of nerve damage and of the contracture returning.

**Dupuytren's Fasciectomy** involves an operation to removing the fibrous band in the palm of the hand. This is often recommended if more than one finger is affected or there is a significant contracture.

## What does the treatment involve?

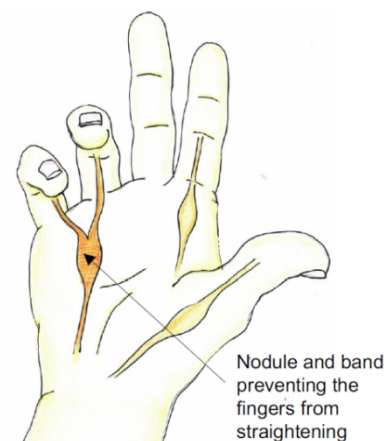
The treatment is undertaken in the procedure room at WPRS.

Xiaflex is injected into the fibrous band of tissue that is causing your finger to bend.

You will be observed for 20 minutes after the procedure to ensure you are safe to travel home.

A second appointment will be made for you at WPRS to attend the clinic 24-48hr after the injection to have the affected finger straightened under local anaesthetic. A splint will be placed on the hand to keep the finger straight.

Hand therapy is considered an integral component of your post-operative management following treatment with Xiaflex. Your hand therapist will help you to control swelling, provide structured exercises and advice regarding movement and scar management if required.



## Post-operative course

You will be able to go home on the same day of treatment with Xiaflex.

You will be provided with post-operative instructions and you should follow these as directed.

You will be given an appointment card for an appointment 24-48hr following the injection to have the affected finger straightened under local anaesthetic. A splint will be placed on the hand to keep the fingers straight.

You should rest following your treatment and only perform light duties. Do not try to straighten the finger yourself.

After your finger has been straightened under local anaesthetic the splint will be adjusted by the hand therapist to keep the finger as straight as possible. You may be required to wear a splint on your hand at night for up to 3 months. You should avoid heavy lifting and strenuous activity for a 1-2 weeks, returning to normal activities by around four weeks.

You may drive a car when you feel safe and comfortable to do so. Most people can return to work at around 1-2 weeks post treatment (depending on the type of work).

Contact phone numbers to call if you have any concerns once you have been discharged home will be available with your post-operative instructions.

## Potential risks of surgery

**Allergic Reaction:** May be mild, however very rarely may be severe. You will be observed at WPRS for 20 mins post surgery.

**Reactions at injection site:** bleeding, pain, itchiness, swelling, tenderness and bruising are common.

**Skin tear:** If the cord is attached to the skin there is a higher risk of skin splitting or tearing during the straightening procedure.

**Incomplete finger straightening:** You will be advised pre-operatively how much correction you can expect from the operation.

**Nerve damage:** Damage to nerves that pass to the finger may result in temporary/permanent numbness. Risk <1%.

**Tendon Rupture/Ligament damage:** Although uncommon, this may occur in upto 4% of injections. Care is taken to inject appropriately to avoid this complication.

**Recurrence:** The more severe your disease the more likely the recurrence. If recurrence occurs then an operation maybe required.

**Complex regional pain syndrome:** Approximately 2-3% risk. This results in pain, sweating and swelling of the hand. Often resolves with hand therapy although may require medication and may be permanent.