

Dupuytren's Partial Fasciectomy - Recovery Guide

Discharge

You will be discharged on the day of surgery.

Dressings / Sutures

You will be discharged from hospital with a bulky dressing covering your hand. Leave the dressing in place until you are reviewed by a hand therapist between 5-10 days. Keep your dressings dry. A plastic bag covering your hand will help to keep the dressing dry while showering.

Swelling / Icing

Post-operative swelling is normal and should gradually decrease over the course of a few months. Elevate your hand higher than your elbow for the first 48 hours to help reduce swelling. Ice may also be applied for the first 24-48 hours to reduce swelling. Apply ice to your hand 3-5 times a day for 20 minutes at a time.

If the swelling worsens, or if you notice redness around the wound or experience a fever, please contact our office immediately or see your local doctor. For after-hours concerns, you can also reach out to the hospital emergency department.

Pain Relief / Medications (*allergies permitting*)

Your anaesthetist will have prescribed a range of painkillers for you to go home with. You should take them as prescribed. In general you should take paracetamol regularly, followed by anti-inflammatories if prescribed and then strong painkillers (such as Palexia/Tapentadol) for top-up pain relief. Cease these medications as soon as the pain allows.

Dr Robinson recommends taking Vitamin C 1000-1500 mg daily from 2 days prior to surgery until at least 3 weeks post surgery.

Splint

A hand therapist will remove your dressings at 5-10 days post the procedure. They will re-dress your wounds and fashion a night time splint. The type of splint will depend on the affected fingers. The splint is worn at night from 12-24 weeks. It is important to remove the splint during the day and only wear it while sleeping.

Post-Operative Appointments

- 5-10 days: See a hand therapist for review. You are responsible for booking & financing hand therapy appointments.
- 2-3 weeks: Your first post op clinic review.
A nurse will remove your dressing and review your wound.

Return to Work / Driving

A reasonable goal for returning to office work is within 2 weeks. For more physically demanding jobs, the target is typically 6 weeks.

Driving can usually be resumed around 5-7 days, after the dressing has been de-bulked by a hand therapist.

Return to Activities guide

Running: 2 weeks

Swimming: Once your wound has healed.

Tennis: 6 weeks

Golf: 6 weeks

Contact sport > 5-6 months

Gym based activities may commence once your wound has healed.

Physical therapy

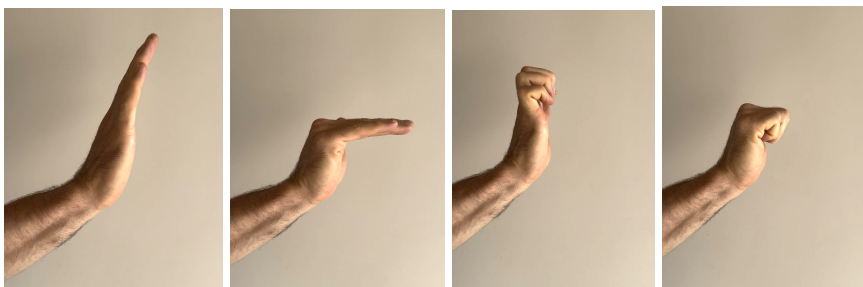
Physical therapy can be commenced from the day of surgery. Let your activity be guided by your pain, **do not continue any exercises that are painful**. Please note these exercises are a guide only, and you may be directed to a more specific program from your hand therapist. Hand therapy is an important part of recovery and can help prevent future problems. You may need to do hand therapy for several months.

Aim to repeat exercises 5-10 times, aiming for a minimum of 3 sessions per day.

Tendon Gliding ([preview here](#))

Tendon gliding exercises help restore the range of motion in your hands and fingers.

- Start with your hand extended and fingers upright, touching each other.
- Bend your fingers at the base knuckles (bottom knuckles) to a 90-degree angle while keeping the other fingers straight and together.
- Bend your middle knuckles while keeping the tips of your fingers straight.
- Bend your fingers at the top knuckles to form a fist.
- Straighten your base knuckles and open your hand back to the starting position.



Finger abduction ([preview here](#))

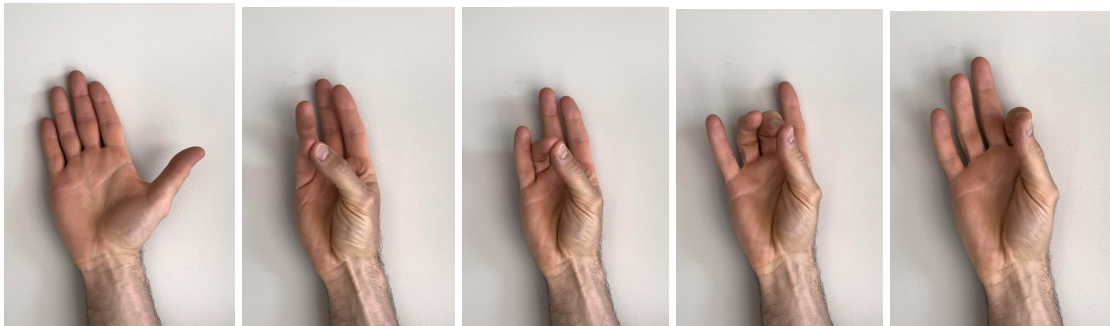
- Hold your hand out comfortably in front of you
- Spread your fingers apart as far as you can and hold
- Return fingers to natural position



Thumb opposition ([preview here](#))

Thumb-finger touches enhance coordination for tasks such as picking up small objects.

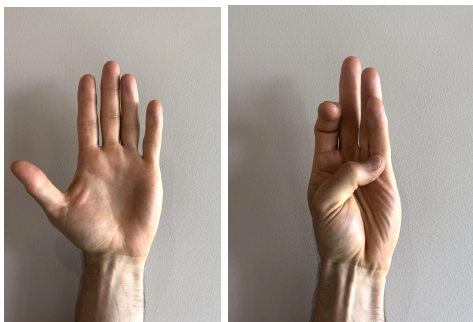
- Hold your hand open and touch each fingertip to your thumb, starting with the index finger and moving to the pinky, then reverse the order.



Thumb flexion ([preview here](#))

Thumb flexion to the base of the little finger.

- Hold your hand and thumb open then touch the thumb to the base of the little finger flexing the thumb at each of its joints.



Wrist flexion and extension ([preview here](#))

Wrist bends improve flexibility and help break up scar tissue.

- Extend your arm with your wrist straight and palm facing down.
- Flex your hand up to the ceiling, and then let it drop downward to the floor.
- A more advanced option is to use your other hand to gently pull your wrist back by your fingers, holding the stretch for 10-30 seconds.

Repeat this exercise 10 times, 3 times per day.



Sideways wrist movements ([preview here](#))

- Rest your affected forearm on a table with your wrist unsupported over the edge, palm facing down.
- Slowly tilt your wrist to one side, then to the other side. Hold each position for about 6 seconds.

