

Dupuytren's Disease - what are my options?

Understanding Dupuytren's Contracture & Your Treatment Options

What is Dupuytren's?

In very brief terms Dupuytren's contracture is a condition where thick cords form under the skin of your palm/fingers, pulling fingers into a bent position. It's **not curable**, but treatments can straighten fingers and improve function.



Treatment Options Explained

1. Radiotherapy (Low dose Radiation)

- **Best for:** *Early stage* (lumps/cords present, **no finger bending yet**).

- **How it works:** Low-dose radiation slows down disease progress by stopping the cell type which characterises the disease process from growing..
 - **Key facts:**
 - ★ **Stops worsening** in ~80% of early cases (5-year data).
 - ✗ *Not effective* once fingers start bending.
 - ⚠ Side effects: Mild skin dryness. *Not for everyone* – discuss risks with your doctor.
 - In most areas of the UK this is not available on the NHS. It is available privately and covered by most Private Medical Insurers.
- <https://Www.Dupuytren.uk.com> is a private clinic run in multiple locations in the UK which provides radiotherapy for this condition.

2. Collagenase Injections (Xiaflex®)




- **Best for:** Finger bending $\geq 20^\circ$ (palpable cord required).
- **How it works:** An enzyme injection dissolves the tight cord. Performed in clinic.
- **Key facts:**
 - ✅ **Quick procedure:** Often 1-2 injections.
 - ✅ **80% success** straightening fingers (especially knuckles).
 - 🔄 **Recurrence:** ~40% within 4 years (higher for fingertip joints).
 - ⚠ Side effects: Bruising, swelling, rare tendon injury.
 - ✗ This treatment was withdrawn from the UK market by the manufacturer for commercial reasons.

3. Needle Procedure (PNF)



- **Best for:** Simple cords causing finger bending.
- **How it works:** Doctor uses a needle to puncture multiple holes through the cord to allow it to break when the finger is stretched out giving immediate correction in 70-95% of people . This is performed under local anaesthesia.
- **Key facts:**
 - ✅ **Minimally invasive:** No stitches, quick recovery.
 - 🔄 **High recurrence:** 50-65% within 3 years.
 - ⚠ Risks: Skin tears, nerve injury (<1%).

4. Open Surgery

- **Types:**
 - *Limited Surgery:* Removes diseased tissue (most common).
 - *Skin Graft Surgery:* For severe/recurrent cases (removes tissue + replaces skin).

- **Key facts:**
 -  **Gold standard** for severe bending or recurrence with 80-90% achieving full correction.
 -  **Most durable result:** Lowest recurrence rates (20-40% at 5 years).
 -  **Risks:** Infection, stiffness, longer recovery (weeks-months) nerve injury leading to numbness and very rarely loss of digit - more common with repeated procedures.

5. Splints

- **Purpose:** *Only used after other treatments* (surgery/injections) to maintain finger straightness.
- **Key facts:**
 -  **No evidence** splints *prevent* Dupuytren's or stop early disease.
 -  May help **after treatment** (night use for 3-6 months).

Comparing Your Options

Treatment	Best For...	Recovery Time	Recurrence Risk
Radiotherapy	Early lumps (no bend)	Minimal	Prevents progression
Collagenase	Mild-moderate bending	Days	Moderate (~40% in 4 yrs)
Needle (PNF)	Simple cords	Days	High (50-65% in 3 yrs)
Surgery	Severe/recurrent cases	Weeks-months	Low-Moderate (20-40% in 5 yrs)

Key Takeaways

1. **Early stage?** → Radiotherapy *may* stop progression.
2. **Finger already bent?** → Collagenase or needle procedures are **less invasive**; surgery is **most durable**.
3. **Recurrence is common:** Dupuytren's often returns – no treatment is permanent.
4. **Splints don't prevent Dupuytren's:** Only used *after* procedures.
5. **Discuss with a specialist:** Treatment depends on your:
 - Finger bend severity
 - Age & health

- Willingness to accept recurrence risk

Always consult a hand specialist to understand which option aligns best with your individual condition and goals.

Sources: International Dupuytren Societies, 2023 Clinical Guidelines (simplified for patients).

Note: This summary simplifies complex medical information. Discuss your specific cases with your doctor.