

Needle Aponeurotomy for Dupuytren's Contracture

FINGER AFFECTED BY DUPUYTREN'S

Contracted cords



**Overview**

This minimally-invasive, non-surgical office procedure is used to help straighten fingers that have become bent by Dupuytren's contracture. A small needle is used to cut the contracted cords that cause the contracture and prevent the finger from fully extending.

**Preparation**

The patient is positioned so that the physician can access the palm of the hand. Ink marks are placed at key points along the contracture where the needle will be inserted. The hand is then cleansed and sterilized.

**Anesthetizing the Skin**

A small amount of local anesthesia is injected into the skin to numb each spot where the needle will be inserted. The nerves and surrounding tissues are not anesthetized, which makes the procedure safer.

**Releasing the Contracture**

The surgeon inserts a small needle at the ink marks along the contracture. The sharp edge of the needle is used to gently cut across the contracted tissue at several places, allowing the finger to straighten as much as possible. Patient feedback during the procedure allows the surgeon to work safely around the nerves in the hand and finger.

**End of Procedure**

After the contracture is released, the surgeon will stretch the finger to break any remaining fibers. An anti-inflammatory steroid will be injected at the needle marks and surrounding tissues. The needle insertion points are bandaged. Elevation and icing of the hand are recommended. Light use of the hand is allowed the same day of the procedure. Normal activities are usually allowed within 10 days of the procedure.

Needle inserted, contracted cords cut

Several points treated

Needle detail

