



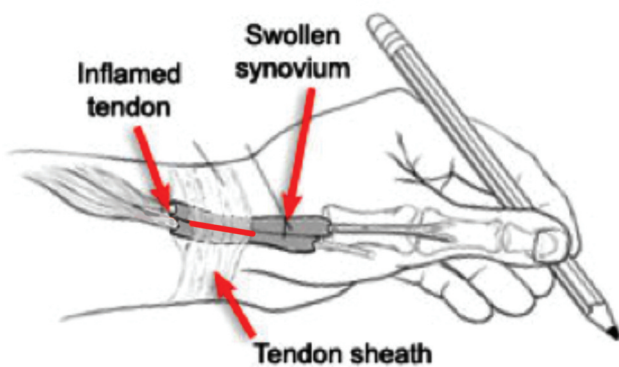
SURGERY

De Quervain's Release

What does this involve?

This involves cutting a tight strap over some of the tendons leading to your thumb.

Most patients with this condition find that their symptoms settle with time, rest, splints, pain killers and steroid injections below the tight strap so only a minority ever need surgery.



Red line shows the position of the cut in the strap

<i>Type of Operation:</i>	Day case
<i>Length of Procedure:</i>	15 minutes
<i>Anaesthesia:</i>	Local anaesthetic



What are the main risks of this operation?

Swelling, Stiffness & Scar pain

This can be reduced by keeping the arm elevated and moving the thumb as soon as possible. Local swelling around the surgical site can persist for several months. Local swelling can be helped by massaging the tissues and this may also improve any irritability in the surgical scar.

Occasionally patients are troubled by more swelling and stiffness than average. In this case Complex Regional Pain Syndrome (CRPS) is sometimes the cause (see relevant information sheet in 'Conditions we Treat'). Severe CRPS occurs in less than 1% of cases.

Infection

This is unusual in the hand (less than 1% of cases). Local wound infections can often be treated with oral antibiotics. Rare, deep seated infections may require re-admission to hospital, antibiotics into the vein and occasionally more surgery.

Nerve Damage

The branches of the superficial radial nerve are most at risk with this operation. These branches supply skin sensation on the back of the thumb and index finger and pass directly over the strap to be divided. Temporary tingling in the area supplied by these nerve branches is common after this operation but occasionally you can be left with a permanent patch of abnormal sensation. This should not affect how your hand and thumb work.

Tendon Subluxation

The strap that is divided during this operation normally keeps the thumb tendons supported on the side of the distal radius (forearm bone). Sometimes, after this operation, the tendons slip out of the strap and flip around the front side of the bone with a little click. This can be an irritation but is not normally uncomfortable.

Residual symptoms

This may occur if the tendons have been damaged by rubbing below the tight strap for a long time. Once the strap is divided the tendons usually gradually recover.

If there was thickening of the strap before the operation this will still be present afterwards as the whole strap is not removed during the operation.

Occasionally a small section of the strap is missed either around or between the tendons and this can mean some symptoms persist. Further surgery might be required in this case, to complete the release.

Post Operative Course

Day 1 & 2

- A sticky dressing and padded bandage is applied after the operation
- Keep the dressings clean and dry
- Keep the arm elevated in a sling or on pillows to reduce swelling
- Start moving all the joints immediately after the operation to prevent stiffness
- Take painkillers before the anaesthetic wears off and as necessary thereafter

Day 3 - 14

- You can take off the padded bandage but keep/replace the sticky dressing over the wound to protect it.
- Keep the wound clean and dry
- Continue gently exercising the hand and wrist. You can use the hand for light activities but avoid heavy loading and prolonged periods with the hand dangling down below your waist.

2 Weeks

- A wound check and trimming of the stitches should occur between 10 and 14 days after your surgery. The details will be arranged on the day of your surgery.
- Continue gradually increasing activities with the hand and wrist as comfort allows.
- Once the wound is completely sealed a daily session of 10 minutes massaging the scar with unscented hand cream is often useful to disperse swelling and desensitise the scar.

6 Weeks

- Most people are back to normal activities by this stage although scar massage may still be useful

Post Operative Difficulties

Contact your surgical centre at any stage if:

- Your fingers become more swollen, stiff or painful than you expect
- You see any discharge, wetness or detect any unpleasant smells from below your dressing

Outside normal working hours you may need to attend your local Accident & Emergency Department for help with these issues.

Driving

You may drive when you feel confident to control the car, even in an emergency. Many patients, particularly if they have had right sided surgery, find they can drive within a week of this operation. Left sided surgery (for the gear stick and hand brake) may take a little longer.

Time off Work

This will vary depending on the nature of your job. A light desk job may only require a few days off work. If you have a very heavy job you may need longer. Discuss your individual case with your surgeon.

Sick notes can be provided on the day of your operation, at your clinic visits and by your own GP.

These notes are intended as a guide and some of the details may vary depending on your individual circumstance and at the discretion of your surgeon.