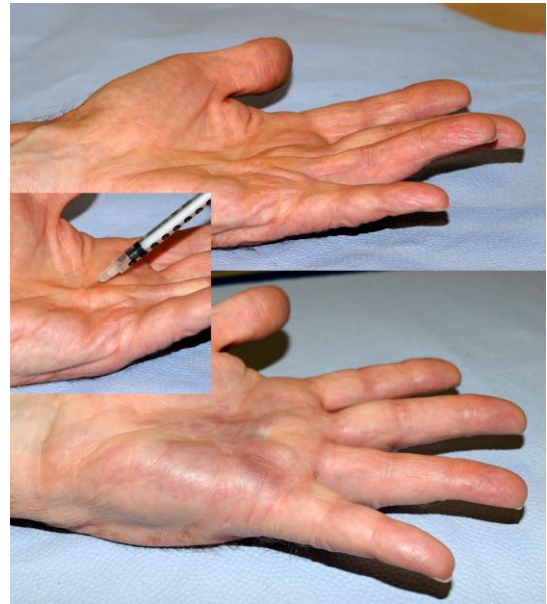


COLLAGENASE INJECTION

Dupuytren's tissue is made of collagen and fibroblast cells. Collagenase is an enzyme capable of breaking down collagen. Xiapex® is a combination of two purified collagenases derived from the bacterium *Clostridium histolyticum*.

Xiapex is administered by injection directly into the Dupuytren's cord in the consulting room. Please remove all rings from the fingers beforehand. The injection itself is only momentarily sore but you will experience discomfort in the hand about four hours later followed by swelling and bruising. The soreness can also spread up the arm even as far as the armpit.

You will need to return for manipulation of the cord 1-3 days after the injection. You will not be able to drive to or from this appointment. The manipulation is always performed under local anaesthetic. Release of the cord often occurs with an audible "snap"; worrying if not



expected! Skin tearing or blistering can occur particularly in severe contractures. These require dressing for a few days. Many patients require no further treatment after the manipulation and can be discharged. Those with more severe contractures may need a splint to help maintain the correction. These and patients with significant tears will be offered review.

Hand elevation is important after both the injection and manipulation to limit swelling and prevent stiffness of the fingers. Please remember not to walk with your hand dangling, or to sit with your hand held in your lap. It is fine, however, to lower your hand for light use. After manipulation, you should get back to normal light activities as guided by common sense. Most patients can drive within 3-5 days of the manipulation. The hand should not be used heavily in the days after injection as the injection can theoretically weaken tendons and ligaments.

The most common side effects seen with Xiapex are local reactions such as swelling, bruising, bleeding and pain. These reactions generally settle within one to two weeks. Serious complications of Xiapex are extremely rare. They include tendon rupture or ligament damage that may result in the inability to bend the finger and may require corrective surgery. Contact my secretary if there is evidence of infection (e.g., fever, chills, increasing redness), sensory changes in the treated finger, or trouble bending the finger after the swelling goes down (symptoms of tendon rupture).

If the contracture remains, you will be reassessed about four weeks after treatment. Another injection can be administered into the same cord and the finger extension procedure repeated the following day. Injections and finger extension procedures may be administered up to three times per cord, at approximately four-week intervals.