

# EXTENSOR TENDON REPAIR

You have just undergone repair/reconstruction of your extensor tendon(s). These tendons run from the forearm muscles to the fingers and are responsible for extending (straightening) your fingers.

Your hand will be elevated whilst in hospital to prevent swelling and stiffness of the fingers. When you leave hospital, please remember not to walk with your hand dangling, or to sit with your hand held in your lap.

Your dressing will often be removed after 24-48hr. Either a light dressing will be applied or the wound will be left open at this stage to avoid interference with movement. There obviously will be some swelling and bruising. Look out for any redness or tenderness in the area around the wound that might indicate an infection. Do not apply antiseptic but please contact my secretary if you have any worries.

You will be seen by a hand therapist who will put you in a protective splint that prevents the repair being over-stretched. This needs to be worn continuously for four weeks and then at night for a further two weeks. Any stitches will be removed at about two weeks after the operation. Following this the scar will be somewhat firm to touch and tender. This can be helped by massaging the area with moisturizing cream.

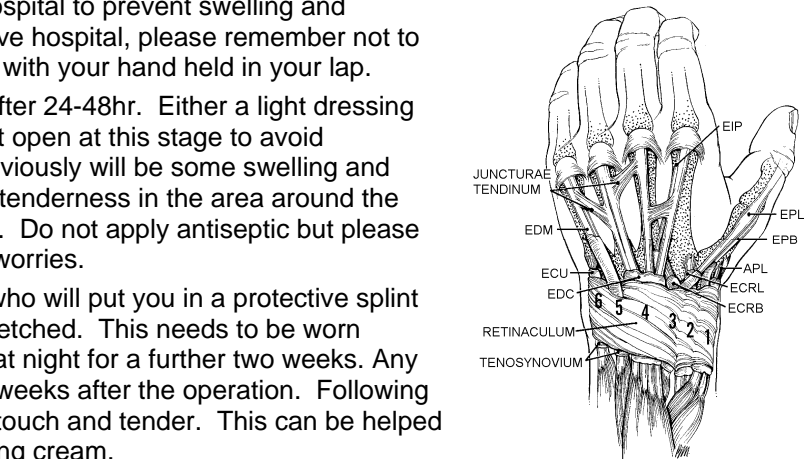
You will be instructed on your exercise program. This is intended to prevent the tendon becoming stuck on the surrounding tissues which will prevent the finger moving properly. The program may be varied but is usually "Four Fours":

**4** hourly, undo the strap across your fingers

**4** Passive extensions (gently lift the injured finger away from the splint with your other hand)

**4** Active extensions (straighten and spread fingers away from the splint)

**4** Active flexions (now bend the finger joints, sliding your nails along the splint towards your palm)



**The repaired tendon is much weaker than normal and takes about 12 weeks to recover full strength. If you do not follow this advice, the tendon repair may snap.** Beware stretching your repair when pushing your hand down a sleeve and opening doors.

**DO NOT** (i) Remove your splint (4 weeks), (ii) Straighten your fingers against the finger strap (6weeks), (iii) Use your hand for anything other than your exercises (6 weeks), (iv) Force your fingers down or into a bent position (10 weeks)

**CONTACT US IF** (i) Redness or increased tenderness in the wound (=infection), (ii) The splint breaks or bends, (iii) You suddenly cannot straighten the finger (=tendon snap)

Return to work; light (clerical) 6 weeks, medium (shop-keeper, light-engineering) 8 weeks, heavy (heavy engineering, building) 10 weeks. Driving; car 6, motorbike and HGV 8 weeks, Sport; 10-12 weeks.

**Wound** Possible problems include swelling, bruising, bleeding, blood collection under the wound (haematoma) and splitting of the wound (dehiscence). Wound infections can occur in 5% of cases of repair, particularly if the injury occurred on a contaminated surface such as in an agricultural setting.

**Scar** You will have a scar, which will be firm to touch and tender for some months. This can be helped by firm massage with the moisturizing cream.

**Tendon snap** Failure of the tendon repair can occur in 5-10% of cases and can be contributed to by factors such as infection or technical failure or patient non-compliance.

**Tendon adhesion** Some loss of tendon glide is very common. In the majority of patients the loss of movement is minor. In some, however, further surgery is required to free the tendon (tenolysis)

**Joint stiffness** Joints in the region can become stiff even if not directly injured as a result of factors such as swelling, infection and immobility. In the majority of patients the loss of movement is minor. In some, however, further surgery is required to release the joint (arthrolysis).

**Regional pain syndrome** About 5% (1 in 20) of people are sensitive to injury and/or hand surgery and their hand may become swollen, painful and stiff. This problem cannot be predicted, is variable in severity and is principally treated with physiotherapy.