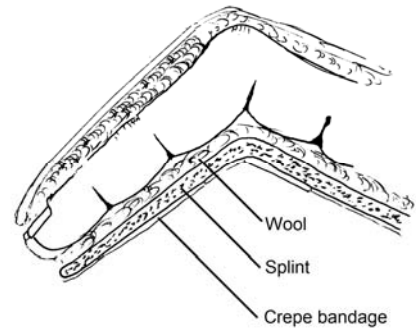


POST-OPERATIVE ADVICE FOR FASCIECTOMY PATIENTS

Your hand has been placed in a dressing that holds the hand in the optimum position for comfort and to prevent joint stiffness. It is helpful to straighten and spread the fingers occasionally off the splint “platform”. Hand elevation is important to prevent swelling and stiffness of the fingers. You may have been discharged with a sling. This should be removed regularly to allow you to exercise the shoulder and elbow to avoid stiffness. However, remember not to walk with your hand dangling, or to sit with your hand held in your lap in the first week or so after your operation.



You will be reviewed at about one week after surgery when the dressing will be removed. If the wound is satisfactory, it will be left open. After removal of the dressing, there will be some swelling and bruising around wounds. Look out for any redness or tenderness in the area around a wound that might indicate an infection. Do not apply antiseptic but ask for medical advice.

Once dressings are removed, it is safe to get the hand wet in a bath or shower but avoid contact with soap, shampoo or dirty water. Wounds and the surrounding skin can become dry and flaky. If this occurs, briefly immerse the whole hand in water to which a small quantity of baby-oil has been added. Commercial moisturisers are best avoided until wounds have healed as they can cause irritation. Your stitches will be dissolving by about two weeks after surgery but wounds are not sealed until a further week. During this time, avoid contact with livestock and agricultural environments, including gardening. Gloves are no protection against the risk of infection.

Splinting is often necessary after this operation to prevent recurrence of the contracture during the healing phase. If you have been provided with a splint as part of your rehabilitation, it is advisable to place a piece of gauze on the splint and between adjacent fingers when it is worn to prevent sweating and/or skin maceration, which encourage infection.

The hand can now start to be used lightly as guided by the position and condition of the wound(s), the time since surgery, your progress, the splinting regimen as well as common sense in relation to the environment and task performed. You may be given specific exercises depending on the operation performed and the time since surgery.

A return to driving requires you to have regained full finger movements and to have sufficient power to control the vehicle. It also depends on the position of wounds and the type of vehicle. Contact of wounds with control surfaces too soon after surgery will delay healing. Timing of your return to work is variable according to your occupation and requires some judgement.

Once healed, scars may become lumpy, firm, tender and pink. The intensity and length of the period of “scar immaturity” is very variable and may take many months to settle. It can be helped by massaging scars and surrounding area firmly with the moisturizing cream.