Medium-term assessment of the management of Dupuytren's disease by regional selective fasciectomy in a series of 25 patients
Karim Latrach Tlemsan, Teka Maher, Sabeur Saad, Hamza Kefi, Yadh Zitoun, Faouzi Abid
University Hospital of Mahdia, Tunisia

Backgrounds
Dupuytren's disease is a benign and progressive fibroproliferative disorder affecting the palmar and digital fascia. This condition typically progresses to contracture of the interdigital spaces, permanent flexion deformity of palmar joints and functional impairment. Regional selective fasciectomy remains the gold standard despite the development of non-operative techniques.

Objectives
The purpose of this study was to assess functional outcomes of Dupuytren's disease surgery in a series of 25 patients treated by regional selective fasciectomy.

Methods
During a period of 5 years from January 2007 to December 2011, at the department of orthopedics and traumatology of the University Hospital Mahdia, a retrospective study was carried out on 25 patients including 20 men and 5 women. We managed 93 rays. Surgical treatment was indicated whenever the hand cannot be placed flat on a table.

All patients performed a regional selective fasciectomy. The mean follow-up duration was 18 months. We used Revised Tubiana's Staging System 1 and URAM 2 scale to evaluate functional outcomes.

Results
The mean age at time of surgery was 57 years old with male predominance. Risk factors for developing Dupuytren's contracture were found in 96% of our patients.

Discussion
Several methods with varying rates of success, complication and recurrence have been reported in the literature to manage Dupuytren's disease but regional selective fasciectomy remains the gold standard. 3 The present study examined midterm outcomes of the management of Dupuytren's contracture. Only regional selective fasciectomy was performed in our study and 89% of the patients had excellent results. The same finding were reported in Khan study who achieved excellent and good results in 97% of the patients after five years of follow-up. 4 Ozkaya et al retrospectively reported no recurrence after 10-year period with regional fasciectomy. 5

Conclusions
The management of Dupuytren contracture relies yet on surgical procedure. Selective fasciectomy offers better functional results with lower rates of complications and recurrence. However, the functional outcome remains significantly correlated with the preoperative status of the disease.

References