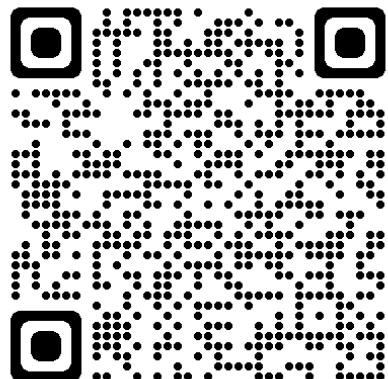




HAVING AN OPERATION ON YOUR HAND OR ARM



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Having an Operation on Your Hand or Arm

The majority of routine operations are successful. It is important to be aware of some of the problems that can happen following surgery. This information sheet outlines some of the complications of surgery and how to minimise their effects.

Rings and Jewellery

Please remove all rings and jewellery from the arm that is having the operation. Trust policy means that we are unable to operate with a ring on the side of the operation. If you are unable to remove the ring, we recommend that you ask a jeweller to cut the ring off.

Wounds

All wounds should be kept clean, dry and covered for 10 days after surgery. This allows normal wound healing to start and reduces the risk of infection. Once the stitches are removed the wound can be cleaned and left open to the air. Do not soak the wound for 2 weeks after surgery.

During the healing process the wound is tender and often itchy. This is normal. The wound is usually healed at 2 weeks but takes around 6 -12 months to settle into a thin white non tender scar.

When you have an operation, nerves on the skin surface are always divided in the wound. This can make the skin surface feel numb around the wound which can be permanent. It is very unusual for this to give any major problems, but you should be careful when handling hot or cold objects.

Haematoma / persistent bleeding

This is an occasional complication of surgery. It is more likely to happen if you are taking aspirin, Warfarin or if you have had difficulty stopping a bleeding cut in the past. You may need a change of dressing and rarely a second operation to stop the bleeding.

You will usually be kept in hospital overnight if the wound bleeding does not settle quickly. The wound is normally closed with stitches. If one of these fails, then the wound can gap and remain open. The wound is allowed to heal and can lead to some widening of the scar but is not serious.

Wound tenderness

This is normal following surgery. In most cases this will settle within 2-3 months of the operation. Rarely, long term tenderness is an issue. Hypertrophic scar formation can occur. This is a condition in which the scar increases in width and feels lumpy. It can give rise to a cosmetic issue but is not serious.

Hand Stiffness

It is important to move the hand early and often following hand surgery to avoid stiffness. Wounds all heal with scar tissue over the course of a few weeks. This scar tissue can stick to normal tissue such as tendons and nerves, preventing normal movement.

Moving the hand soon after surgery will ensure that the structures under the wound glide against each other and the wound more easily. Exercise the hand by bringing the

fingers down into a full fist and then straighten the fingers out fully around 10 times every half hour.

Physiotherapy is occasionally necessary after hand surgery. Your movement will be assessed by the nurse or doctor at the post surgery visit. Any issues should be raised with them.

Infection

Wound infection affects around 1 in 100 patients following an operation. In some cases, there may be some redness around the stitches. This will settle after removal of sutures and does not require treatment.

More severe cases may require antibiotic treatment and occasionally a further operation to clean out the wound. This is very unusual.

Complex regional pain syndrome (CRPS)

CRPS is a rare but very serious complication following surgery to the hand or arm, affecting 1 in every 2000 patients. It causes pain and increased sensitivity, swelling and stiffness in the hand. It can be treated with physiotherapy and medical therapy.

It can take up to 2 years to improve. Sometimes patients have long term disability as a result and the effects of this condition can be worse than the original problem.

Compartment syndrome

This is a rare condition following hand surgery. It is a consequence of swelling within muscle compartments of the hand and arm that can lead to irreversible damage to nerves and muscles if not diagnosed and treated. Typical symptoms include disproportionate pain that does not respond to painkillers and 'pins and needles' in the hand and fingers.

The treatment is further surgery under a general anaesthetic which involves releasing the pressure within the muscle compartments. These wounds are then closed several days later when the swelling has subsided. Permanent debilitating loss of function of the hand and arm can be a consequence of compartment syndrome.

Nerve and blood vessels injury

There is a risk of nerve or blood vessel injury when operating on the arm and hand. There are very small nerves in the skin that can be damaged resulting in some altered sensation at the site of the surgical incision. This altered sensation tends to improve over time.

Damage to large nerves is rare but often this is due to the nerve being stretched or bruised. This can result in altered sensation and occasionally weakness that is usually temporary. Permanent damage to a nerve or complete division of a nerve during surgery is extremely rare but can result in long term loss of function of the arm and hand. Blood vessels can be damaged during surgery. Most bleeding is stopped during the operation or resolves shortly after the operation. However, very rarely a blood vessel could be damaged that requires further surgery or in extremely rare circumstances may risk the blood supply to a finger or thumb.

Deep Vein Thrombosis and Pulmonary Embolism

Deep vein thrombosis occurs when blood occupying the veins of the leg forms a clot, usually due to lack of movement. For this reason, all patients having a general anaesthetic have a mechanical compression device attached to the lower legs, in order to prevent stasis.

These clots are a problem because they can detach and travel in the blood stream to the lungs and heart (pulmonary embolus). Although deep vein thrombosis is relatively common after lower limb surgery, it is extremely rare after hand surgery, and is seen in around 1 in 10 000 cases.

If you know of any family members who have suffered from this condition, please let the nurse or doctor know.

All complications are significant events, but most can be treated successfully and are likely to improve over time with little or no long-term detriment to normal function.

However, around 1 in 2000 patients can experience a major complication that can be life threatening or result in long term or permanent loss of function of the hand or arm.

Working after an operation

Time off work may be required following surgery, depending on and the type of job you have. There are no hard rules about this. Patients with heavy manual jobs may need 4-6 weeks off work, whereas patients with office-based jobs often return to work within a few days.

You should discuss this with your doctor on the day of surgery and request a sick line if necessary.

Performing daily tasks after an operation

Although we encourage early mobilisation of your hand and wrist following an operation, it is important to recognise that some tasks may be more challenging such as preparing food and dressing/undressing yourself.

It may be useful to anticipate this particularly if there is no one at home to assist you.

Driving

You should not drive after hand surgery until you are fit to do so. It takes time to recover from the effects of the anaesthetic. Some of the painkilling medication you will be prescribed will affect your fitness to drive.

If your hand or wrist are painful or stiff you may not be able to drive safely. It is your responsibility to ensure that you are fit to drive in terms of the DVLA guidance in respect of your hand surgery and in respect of any other medical condition that you may suffer from.

There is detailed information on the DVLA website about fitness to drive and you should refer to that before driving. If you are in any doubt, consult your surgeon or GP and also your insurance company.

Different motor insurers have different policies about medical fitness to drive and you should check you are insured before driving.