Dupuytren's contracture treatment

NHS Devon

Commissioning policy

Treatment is not commissioned in cases where there is no contracture, and in patients with mild (less than 20°) contractures, or one which is not progressing and does not impair function.

Surgical intervention (needle fasciotomy, fasciectomy and dermofasciectomy) is commissioned for:

- Finger contractures causing loss of finger extension of 30° or more at the metacarpophalangeal joint or 20° at the proximal interphalangeal joint

  or

- Severe thumb contractures which interfere with function

Rationale for the decision

Dupuytren's contracture is a fairly common condition in which small nodules of connective tissue in the palm of the hand grow into cords of shortened tissue causing one or more fingers to bend towards the palm of the hand. The symptoms of Dupuytren's contracture are often mild and painless and do not require treatment.

With increasing contracture, patients are more affected, with reduced function and 'clumsiness' as a result of the contracted fingers 'getting in the way' and catching objects. There is great variation in the rate of disease progression. Most patients with Dupuytren's Disease without contracture do not need treatment and can be managed expectantly. Surgery for this group of patients is low priority. An appropriately timed referral to a surgical specialist before irreversible contracture develops can prevent permanent loss of function.

Contractures left untreated usually progress and often fail to straighten fully with any treatment if allowed to progress too far. All treatments aim to straighten the fingers(s) to restore and retain hand function for the rest of the patient's life.

Complications causing loss, rather than improvement, in hand function occur more commonly after larger interventions, but larger interventions carry a lower risk of need for further surgery.

This policy has been reached after considering guidance for Dupuytren's contracture release published by NHS England in November 2018.

Guidance notes on exceptionality

Where the circumstances of treatment for an individual patient do not meet the criteria described above exceptional funding can be sought. Individual cases will be reviewed by the appropriate panel of the ICB upon receipt of a completed application from the patient's GP, consultant or clinician. Applications cannot be considered from patients personally.

Date of publication:	Version:
04.03.2020	Policy updated by NHS Devon CCG following the discontinuation of collagenase clostridium histolyticum (Xiapex®) in the UK and the withdrawal of NICE technology appraisal 459 Policy adopted by NHS Devon ICB on 01.07.2022