



Dupuytren's Management Trends: A Survey of Members of the American Society for Surgery of the Hand

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OBJECTIVE

Indication for intervention in Dupuytren's disease is influenced by many factors including location and extent of disease, surgeon preference and comfort level with different techniques. The aim of this study was to determine current Dupuytren's disease management trends.

METHODS

A questionnaire was sent to members of the American Society for Surgery of the Hand in which participants were queried on their current Dupuytren's management practices. The survey requested respondent demographic data, practice type and resident and/or fellow involvement. Questions focused on indications for different procedural interventions based on location of disease, age and activity level of the patient. We also aimed to determine whether cost or available evidence affected practice patterns.

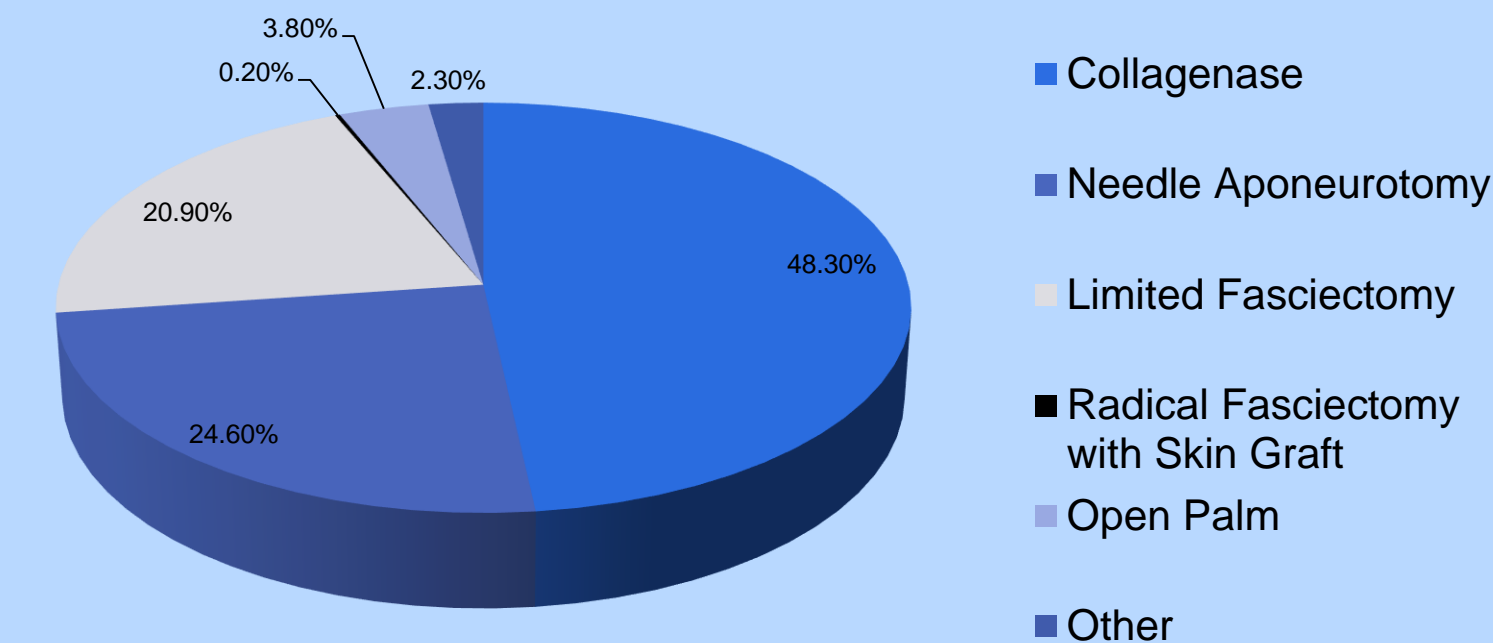
RESULTS

638 of 2676 (23.8%) active ASSH members completed the survey. Respondents were most commonly part of a group private practice (58.1%) followed by academic (18.5%) and solo practice (11.1%). The majority of respondents did not work with residents or hand surgery fellows (54.4%). Orthopedic surgeons comprised the majority of the cohort (81.6%) followed by plastic surgeons (14.1%) and general surgeons (5.9%). Seventy-six percent of respondents reported seeing 10 or less Dupuytren's patients per month. Thirty-nine percent of respondents performed needle aponeurotomy for Dupuytren's disease and 65.5 % reported using collagenase.

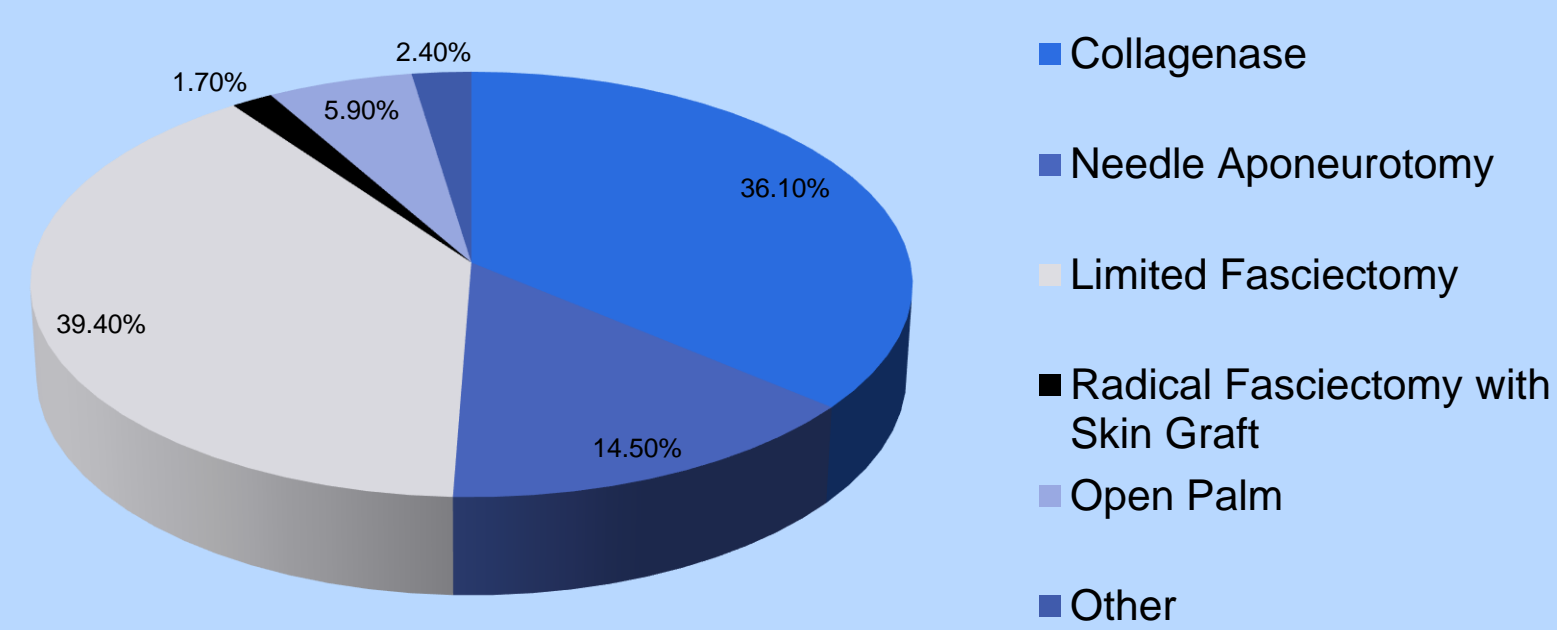


RESULTS

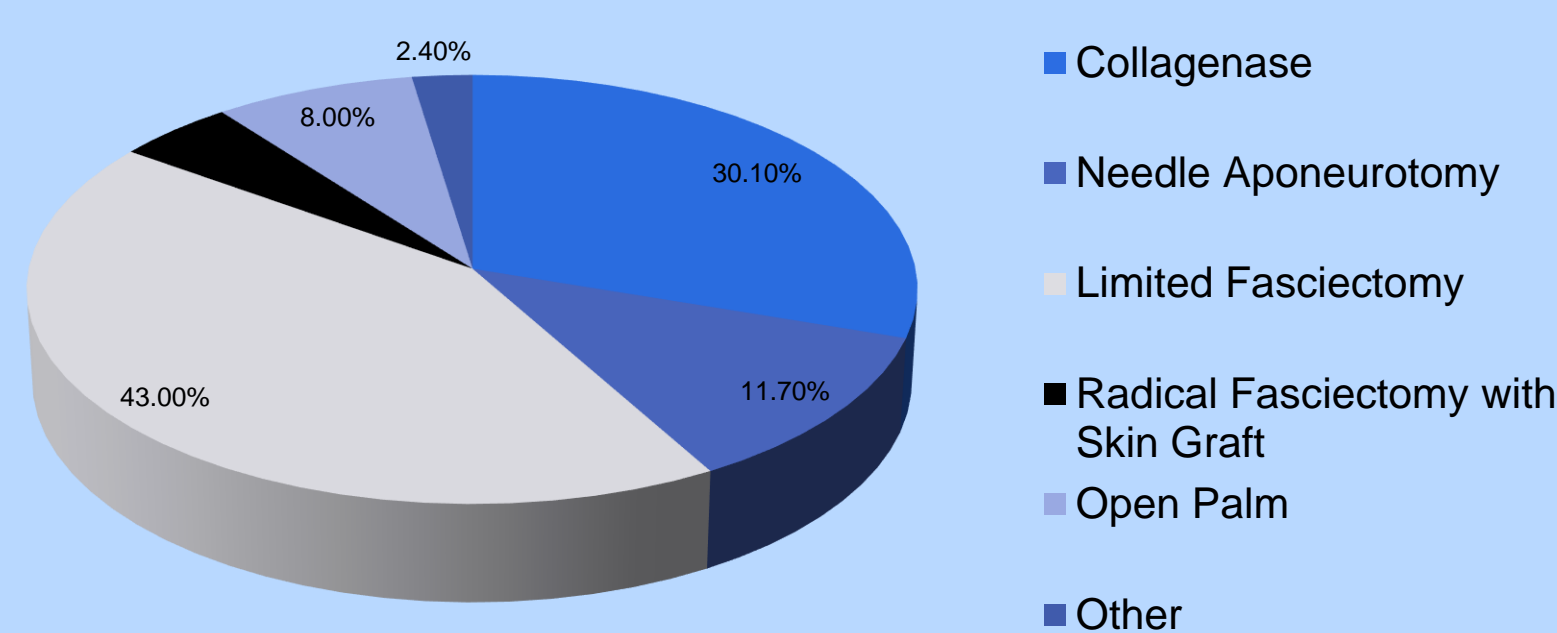
Preferred Treatment for Disease Involving the MP Joint



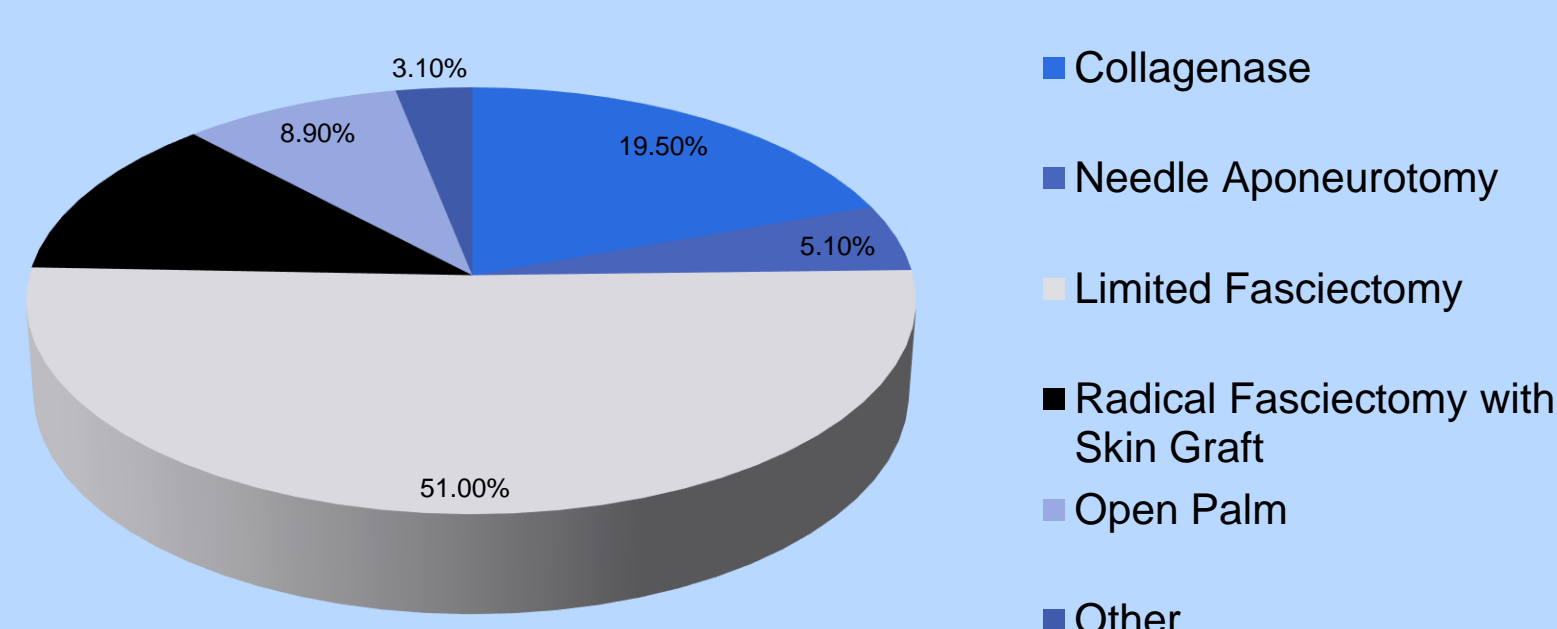
Preferred Treatment for Disease Involving the MP and PIP Joints



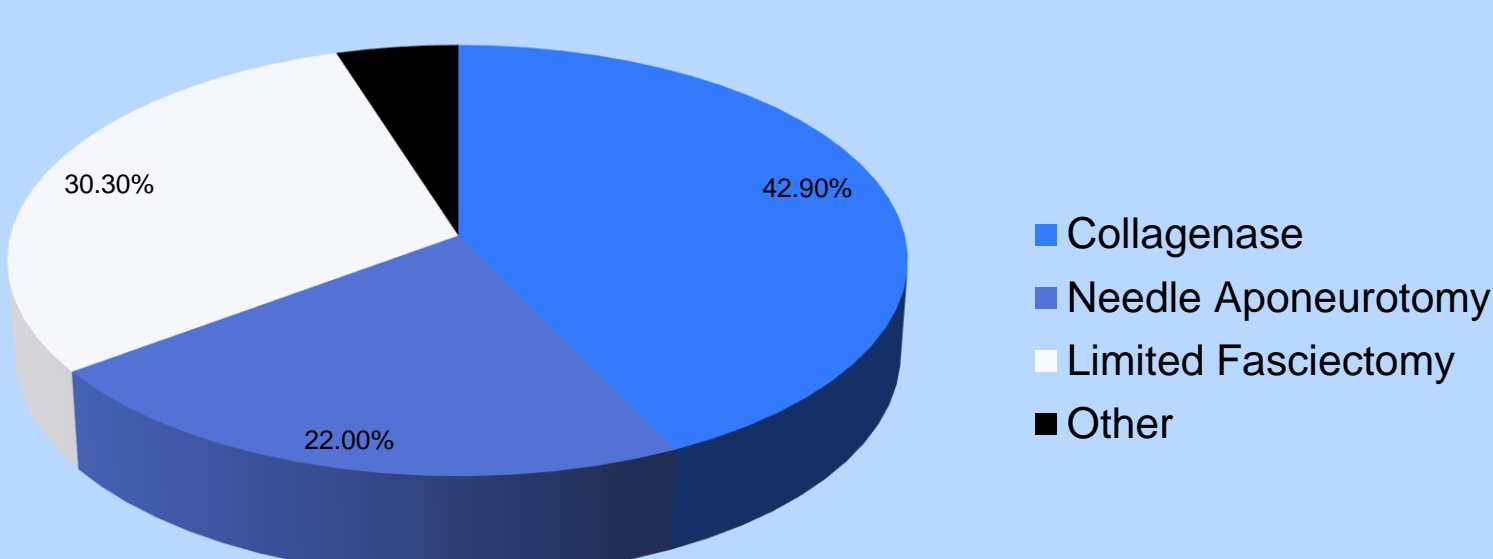
Preferred Treatment for Recurrent Disease Involving the MP Joint



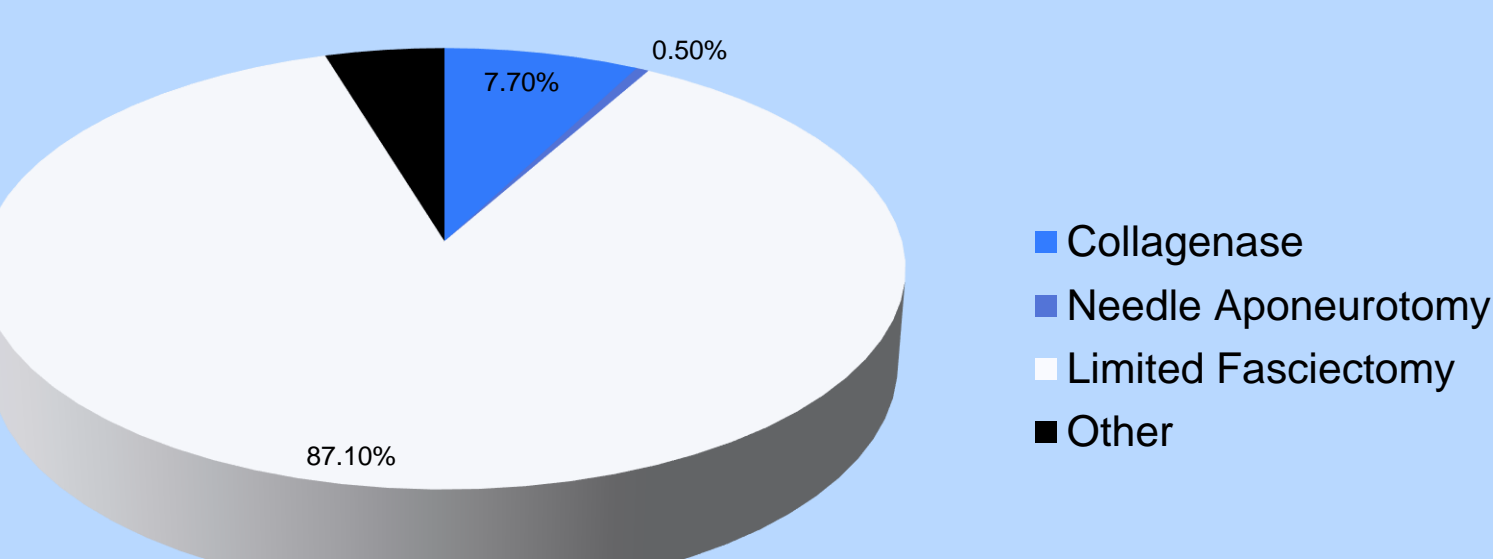
Preferred Treatment for Recurrent Disease Involving the MP and PIP Joints



Best Treatment for a Patient Amenable to Any



Longest Disease Free Survival



RESULTS

Eighty-one percent of the respondents felt that there is sufficient evidence for the use of collagenase though 51.3% of the cohort felt that the cost of collagenase was not worth the benefit.

When analyzed by board certification, 60.6 % of plastic hand surgeons use collagenase compared to 63.3 % percent of orthopedic hand surgeons.

For a patient amenable to any surgical option, orthopedic hand surgeons prefer collagenase injection (38.8%) whereas plastic hand surgeons prefer a limited fasciectomy (33.7%).

CONCLUSIONS

There are several options available for the treatment of Dupuytren's contractures. This survey study details current practice patterns among members of the American Society for Surgery of the Hand and supports the need for further comparative studies with respect to location and severity of disease, time to contracture recurrence, and cost of treatment.

