Xiapex injection for Dupuytren's contracture

You've been listed for an injection with an agent called Xiapex to correct a contracture caused by Dupuytren's disease. Xiapex contains special enzymes that digest Dupuytren's tissue. While the treatment is usually safe and successful, there are potential complications. As part of the consent process I will explain some of the common and/or significant complications. This list doesn't include every single complication that could possibly occur, but will focus on the important ones. While it is important that you understand the risk of complications, this shouldn't put you off having the injection, as the potential benefits of successful treatment by far outweigh the small risk of complications. Please don't hesitate to get in touch with me if you've got any further questions about this.

Failure: There is no guarantee of success with this treatment. While approximately 90% of patients get very good correction of their deformity, there are some patients where there is only partial or no improvement at all. Those patients will benefit either from a further injection or traditional surgery (both of which will have to be funded either through your insurance or by yourself).

Recurrence: Treatment with Xiapex doesn't cure Dupuytren's disease, the injection simply helps straightening a deformed finger. You will continue to have Dupuytren's disease for the rest of your life and it is likely that you will get a recurrence either in the same finger or in other fingers. Unfortunately, there is no cure for Dupuytrens, all the different ways of treating this condition including surgery and Xiapex only straighten bent fingers. If recurrence of Dupuytren's should cause significant problems again, treatment is possible, either with Xiapex or surgery, that depends on the individual presentation.

Skin tears: The worse the deformity, the higher the risk of the skin tearing in the process of straightening the deformed finger. This is common. Even large tears heal well with simple dressings. Healing time varies depending on the size of the tear. This could take roughly 1-4 weeks.

Swelling and bruising: You will almost certainly get swelling and bruising in the hand and finger. This is normal and not of any particular concern. Both swelling and bruising will settle with time. If you are on anticoagulants (blood thinning medication) this medication should be stopped prior to the Xiapex injection, please discuss this with me or your GP to insure this is done safely.

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Allergic reactions: Severe allergic reactions including anaphylactic shock have been described, but are very very rare. You should stay in the waiting room for 30 minutes following the injection and ask for help immediately if any of the following occur: wide spread redness or rash, swelling, tightness in the throat/chest or difficulty breathing, repeated sneezing, itchiness, dizziness.

Tendon rupture: If injected in the wrong place there is a very minimal risk of Xiapex digesting tendon tissue leading to rupture of flexor tendons. This is a very rare problem. A ruptured tendon may require surgical treatment followed by a lengthy time of rehabilitation.

Pain: The injection isn't usually too painful. For the straightening procedure you will get an injection with local anaesthetic (and the local anaesthetic agent stings badly when injected) to keep you comfortable. Some patients may require pain killers (like for example simple Paracetamol) following the injection or the straightening procedure.

Interaction with other drugs: The use of Xiapex is not recommended if you have received tetracycline antibiotics within 14 days of the injection.

Pregnancy: The use of Xiapex is not recommended during pregnancy.

Following the injection: You will have a padded bandage around your finger and the wrist. You can use your hand as pain allows. Pain levels should be low, some patients may require painkillers. Don't try to force your finger straight. Swelling and bruising are common and usually no cause for concern.

Following the manipulation: Dressings are only needed if there should be a skin tear. You can mobilise as pain allows. You might need painkillers once the local anaesthetic wears off, but for most patients pain levels are low. You will see the hand therapist a few days later for your Rehab.

If you would prefer to discuss this again with me prior to treatment then please contact my secretary : Tel 07935 480188, Email jfortho.secretary@gmail.com

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