

Trial Description

Title

Supplementary arthrolysis of the proximal interphalangeal joint of fingers in operative treatment of Dupuytren's contracture

Trial Acronym

arthrolysis of the proximal interphalangeal joint

URL of the trial

[---]*

Brief Summary in Lay Language

Clinical follow-up of 33 patients with Dupuytren's flexion contracture of fingers who were treated operatively between January 2012 and December 2014 by supplementary arthrolysis of the proximal interphalangeal (PIP) joint beside fasciectomy. The current joint position of the PIP joint will be measured with a goniometer, satisfaction with the result will be documented on a visual analogue scale (0-10 points) and the DASH (Disabilities of the Arm, Shoulder and Hand) score will be calculated. The data will be compared to preoperative data retrospectively.

Brief Summary in Scientific Language

In the surgical treatment of Dupuytren's flexion contracture of the finger in some cases a flexion contracture of the proximal interphalangeal (PIP) joint remains after removal of the diseased connective tissue. This is a consequence of chronic flexion and is caused by shortening, shrinkage and bonding of the surrounding joint structures. So far, there are few studies that deal with the results for a supplementary arthrolysis of the PIP joint [1-7].

33 patients with Dupuytren's flexion contracture, in which a supplementary arthrolysis of the PIP joint was performed beside partial fasciectomy will be followed up clinically for an average of 22 months.

References

- 1. Belusa L, Buck-Gramcko D, Partecke BD (1997) Ergebnisse von Mittelgelenkarthrolysen bei Patienten mit Dupuytren-Erkrankungen. Handchir Mikrochir Plast Chir 29:158-163**
- 2. Beyermann K, Jacobs C, Lanz U (1999) Severe Contractures of the Proximal Interphalangeal Joint in Dupuytren's Disease: Value of Capsuloligamentous Release. Hand Surg 4:57-61**
- 3. Beyermann K, Jacobs C, Prommersberger KJ et al (2002) Die fortgeschrittene Dupuytren'sche Kontraktur des Mittelgelenkes: Ist die Arthrolyse bei fortbestehender Fehlstellung nach Resektion des Kontrakturgewebes sinnvoll? Handchir Mikrochir Plast Chir 34:123-127**
- 4. Beyermann K, Prommersberger KJ, Jacobs C et al (2004) Severe contracture of the proximal interphalangeal joint in Dupuytren's disease: does capsuloligamentous release improve outcome? J Hand Surg Br 29:240-243**
- 5. Haßelbacher K, Bleuel S, Landsleitner B (2002) Langzeitergebnisse nach beugeseitiger Mittelgelenkarthrolyse. Handchir Mikrochir Plast Chir 34:355-362**

6. Watson HK, Light TR, Johnson TR (1979) Checkrein resection for flexion contracture of the middle joint. J Hand Surg Am 4:67-71

7. Weinzweig N, Culver JE, Fleegler EJ (1996) Severe contractures of the proximal interphalangeal joint in Dupuytren's disease: combined fasciectomy with capsuloligamentous release versus fasciectomy alone. Plast Reconstr Surg 97:560-566

Organizational Data

- DRKS-ID: **DRKS00008564**
- Date of Registration in DRKS: **2015/05/20**
- Date of Registration in Partner Registry or other Primary Registry: [---]*
- Investigator Sponsored/Initiated Trial (IST/IIT): **yes**
- Ethics Approval/Approval of the Ethics Committee: **Approved**
- (leading) Ethics Committee Nr.: **15-124 , Ethik-Kommission der Medizinischen Fakultät der Universität zu Köln**

Secondary IDs

Health condition or Problem studied

- ICD10: **M72.0 - Palmar fascial fibromatosis [Dupuytren]**

Interventions/Observational Groups

- Arm 1: **Observational study:**
Clinical follow-up of 33 patients with Dupuytren's flexion contracture of fingers who were treated operatively between January 2012 and December 2014 by supplementary arthrolysis of the proximal interphalangeal (PIP) joint beside fasciectomy after an average of 22 months. The current joint position of the PIP joint will be measured with a goniometer, satisfaction with the result will be documented on a visual analogue scale (0-10 points) and the DASH (Disabilities of the Arm, Shoulder and Hand) score will be calculated. The data will be compared to preoperative data retrospectively.

Characteristics

- Study Type: **Non-interventional**
- Study Type Non-Interventional: **Observational study**
- Allocation: **Single arm study**
- Blinding: [---]*



Study Type: **Non-interventional**

Study Type Non-Interventional: **Observational study**

Allocation: **Single arm study**

Blinding: [---]*

- Who is blinded: [---]*
- Control: **Uncontrolled/Single arm**
- Purpose: **Treatment**
- Assignment: **Single (group)**
- Phase: **N/A**
- Off-label use (Zulassungsüberschreitende Anwendung eines Arzneimittels): **N/A**

Primary Outcome

Measurement of the current joint position of the PIP joint with a goniometer.

Secondary Outcome

Documentation of satisfaction with the result of the operation by a visual analogue scale (0-10 points); calculation of the DASH (Disabilities of the Arm, Shoulder and Hand) score; comparison of the data to preoperative data.

Countries of recruitment

- **DE Germany**

Locations of Recruitment

- University Medical Center **Köln**
- Medical Center **Elbe Klinikum Stade, Stade**

Recruitment

- Planned/Actual: **Actual**
- (Anticipated or Actual) Date of First Enrollment: **2015/06/02**
- Target Sample Size: **33**
- Monocenter/Multicenter trial: **Multicenter trial**
- National/International: **National**

Inclusion Criteria

- Gender: **Both, male and female**
- Minimum Age: **18 Years**
- Maximum Age: **no maximum age**

Additional Inclusion Criteria

33 patients with Dupuytren's flexion contracture of fingers who were treated operatively between January 2012 and December 2014 by supplementary arthrolysis of the proximal interphalangeal (PIP) joint beside fasciectomy.

Exclusion criteria

none

Addresses

■ Primary Sponsor

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Sources of Monetary or Material Support

- **Institutional budget, no external funding (budget of sponsor/PI)**

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Status

- Recruitment Status: **Recruiting complete, follow-up complete**
- Study Closing (LPLV): **2015/06/30**

Trial Publications, Results and other documents

- Paper [**Supplementary arthrolysis of the proximal interphalangeal joint of fingers in surgical treatment of Dupuytren's contracture**]. Hohendorff B, Biber F, Sauer H, Ries C, Spies C, Franke J. Oper Orthop Traumatol. 2016 Feb;28(1):4-11

* This entry means the parameter is not applicable or has not been set.

*** This entry means that data is not displayed due to insufficient data privacy clearing.