## HERVEY BAY HOSPITAL



SPECIALISI CLINICS-ORTHOPAEDICS

Dictated: 24.06.05 Typed: 24.06.05

Queensland Health

SC/ph

Dr Ogunseye Eli Waters Medical Centre 22 Ibis Boulevard PIALBA QLD 4655

Dear Dr Ogunseye

RE:

P443

- HBH UR

I have reviewed P443 in the Orthopaedic Outpatients Clinic at Hervey Bay Hospital about her left hand As you know, she has Dupuytren's disease and had excision of her Dupuytren's here on 8 December 2004. She had originally been seen in mid 2003, but surgery had to be delayed because of cardiac problems, for which she subsequently had a stent. It is not recorded what degree of contracture she had pre-operatively, although on what she is indicating today, this was probably 70-80° at the PIP joint on the little finger and 90-95° at the PIP joint on the middle finger, she was having Occupational Therapy until two or three month's ago when she went to Melbourne, and hasn't been back since, but says she is continuing to do things at home Her main complaint now is of the contracture in the scar, although she does still have limitation of extension at her PIP joints and also has limited flexion at the DIP joints She is unable to tell me whether this restricted flexion of the DIP joints was present preoperatively or not

She has scars over the palmar aspect of the hand. The operative notes record that there were Brunner incisions done, but she now seems to have relatively straight scars, both of which have formed keloid She does have a number of scars elsewhere on her body, which have not formed keloid. She had some persisting Dupuytren's disease in the palm over the middle ray. Her range of movements are index finger PIP joint there is 90°, DIP 0-50°, middle finger PIP 45-90°, DIP 0-20°, ring finger PIP 30-95°, DIP 0-35° and little finger PIP 40-90°, DIP 0-40°

She is asking whether there is anything that can be done, particularly to improve her scar as much as the rest of the disease and it is likely that revision of this with Z-Plasties may well be beneficial. I have however, told her that with or without further releases, the Dupuytren's with not gain her increased flexion, and that she will need to work on this with the Occupational Therapists. I have given her another referral today.

I will refer her to DI Peter Rowan at the Royal Brisbane Hospital, to see if he feels there is anything else he can offer her.

Yours sincerely

Dr Scott Crawford Director of Orthopaedics The Prince Charles Hospital

Date signed: 20/6/65

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P. 05

HERVEY BAY HOSPITAL

SPECIALIST CLINICS - ORTHOPAEDICS

Dictated: 24.06.05 Typed: 24.06.05

SC/ph

Dr Peter Rowan Hand Surgeon Royal Brisbane Hospital Herston Road HERSTON QLD 4029

Dear Peter

RE: P443

-- HBH UR

Could you please review P443 , who had Dupuytren excision at Hervey Bay Hospital in December 2004, and has some ongoing problems? Please see an enclosed copy of the letter to her GP.

Yours sincerely

Dr Scott Crawford Director of Orthopaedics The Prince Charles Hospital

Date signed: .....

Encl.

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## HERVEY BAY HOSPITAL

SPECIALIST CLINICS - ORTHOPAEDICS

Dictated: 07.09.05 Typed: 07.09.05

SC/ph

Dr Ogunseye Eli Waters Medical Centre 22 Ibis Boulevard PIALBA QLD 4655

Dear Dr Ogunseye

RE:

P443

- HBH UR

I have reviewed p-143 in the Orthopaedic Outpatients Clinic at Hervey Bay Hospital today. I am not sure if you have a copy of Dr Peter Rowan's letter, but I will make sure that it is enclosed with this letter. She came back wanting to see whether I would be happy doing her surgery up here, but she has a fairly complex situation and I am sure that Dr Rowan continuing her care is the best thing. She is happy with this and is going to remain under his care.

Yours sincerely

Dr Scott Crawford Director of Orthopaedics The Prince Charles Hospital

Date signed: .....

Encl.







## Royal Brisbane and Women's Hospital Health Service District

Queensland Health

EPARTMENT:

UPPER LIMB CLINIC

EFFERENCE:

PR:MN

EDUR UR:

11 August 2005 (Dictated 04.08.2005)

Scott Crawford
Sectalist Clinics
Hervey Bay Hospital
Cnr Nissen St & Urraween Road
HERVEY BAY 4655

Dear Scott

RE:

P443

: UR

Thanks for referring P443 She is a 66 year old right handed woman who has bilateral Dupuytren's contractures. Her right hand was operated on in Victoria about seven years ago with quite a good result. Her left hand was operated on at Hervey Bay Hospital in December 2004. Unfortunately she still has a fair degree of pain and stiffness and her sears had formed keloid. She told me she has had hand therapy for about five months after surgery and was treated with CICA Care splints and range of motion exercises. She has recently been discharged from hand therapy.

Her current symptoms are of pain and loss of motion. On specific questioning she does report frequent colour change and increased sweating in the left hand.

Examination reveals persistent contracture of the PIP joints especially of the middle, right and little fingers. She has a 70° contracture of the right middle finger and a 50° of the little finger. The non-operated ring finger has a 50° contracture. She can flex them all to 90° and still has an incomplete fist. She has fairly longitudinal keloid scars along the palmar aspects of the middle and little fingers which appear to be examinating to her loss of motion. The scars remain quite tender.

Think put 3 will require scar revisions. I have emphasised to her that revising her scars with Z-minutes will not fix her dystrophic symptoms. I have encouraged her to continue her range of motion work and in particular to focus on regaining her full fist. One could even expect that the dystrophic symptoms might worsen for a period after her revision surgery. She has been placed on the waiting list here for scar revisions including Z-plasties. In the meantime she should continue her home exercise program. She will require further hand therapy after surgery. I would expect her dystrophic symptoms to settle over time, regardless of whether surgery is done.

Tranks for referring P443.

LEADERS IN HEALTH - PARTNERS FOR LIFE

Kind regards

Yours sincerely

Pefer Rowan
Orthopaedic Surgeon

TOWARDS A SMOKE FREE FUTURE

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