Dupuytren’s contracture* management: patient and physician perspectives

The ‘Dupuytren’s Summit’ is a scientific meeting about Dupuytren’s contracture, funded and organised by Pfizer and supported by FESSH ( Federation of European Societies for Surgery of the Hand). The meeting was held for the second time on 15–16 March 2013 in Vienna, attended by approximately 250 hand surgeons. This year, ‘Dupuytren’s Summit 2013: Extending our reach together’, covered a range of topics about the management of Dupuytren’s contracture; one of these was around the patient and physician perspectives relating to the management of this condition.

Each patient with Dupuytren’s contracture has a different experience in terms of nature and severity of the disease and the goals of treatment will vary from patient to patient, for example, for some patients the goal will be full correction, for others partial correction that increases hand function will be sufficient, and for others relief of pain and discomfort may be the major aim. However, patient satisfaction is the ultimate goal, and managing patient expectations is an important part of this.

Mr Warwick says, “For patients with an isolated palpable cord and good skin cover, I now tend to treat with collagenase clostridium histolyticum (CClH), and for those with dense disease or scarring, a skin graft.”

Commonly reported adverse events are injection site skin and tissue reactions and blisters but patients generally recover within 1–2 weeks of injection.

Cases of tendon rupture and tendonitis have been reported but uncommon.

Mr Warwick says that CClH can be used in Dupuytren’s contracture with a palpable cord, and this has been seen in Mr Warwick’s clinical practice.

Mr Warwick believes that because revision surgery is technically much more difficult with dense disease or scarring, a skin graft is particularly suitable for patients with dense disease.

Mr Warwick says, “For patients with an isolated palpable cord and good skin cover, I now tend to treat with collagenase clostridium histolyticum (CClH), and for those with dense disease or scarring, a skin graft.”

Mr Warwick is a consultant hand surgeon at the University Hospital Zürich, Switzerland, and Head of the Hand Surgery and Research Unit.

Mr Warwick states that because revision surgery is technically more difficult with dense disease or scarring, a skin graft is particularly suitable for patients with dense disease.

Mr Warwick says, “For patients with an isolated palpable cord and good skin cover, I now tend to treat with collagenase clostridium histolyticum (CClH), and for those with dense disease or scarring, a skin graft.”

Dr. Calcagni is a speaker and consultant for Pfizer. He is also a senior fellow with the International Dupuytren Society, is financially supported by Pfizer.

FSM: Financial support may be provided for travel, accommodation, and other expenses required by medical/surgical intervention, in joints previously treated to this method such as the very bent PIP joint.

Driving and operating machinery: Patients should be instructed that Xiapex can be used during pregnancy. Xiapex can be used during breast feeding.

Pregnancy & Lactation: Patient should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

Xiapex® (Collagenase clostridium histolyticum injection) Summary of Product Characteristics (SmPC).

Xiapex® (Collagenase clostridium histolyticum injection) Summary of Product Characteristics (SmPC).

Xiapex is not fully characterised. The impact of treatment on musculoskeletal syndrome but the potential for it to occur cannot be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

Driving and operating machinery: Patients should be instructed that Xiapex can be used during pregnancy. Xiapex can be used during breast feeding.

Pregnancy & Lactation: Patient should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

Xiapex® (Collagenase clostridium histolyticum injection) Summary of Product Characteristics (SmPC).

Xiapex® (Collagenase clostridium histolyticum injection) Summary of Product Characteristics (SmPC).

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to your local Pfizer office.

14. A prospective study linked both alcohol and tobacco to Dupuytren’s disease.

15. Injectable collagenase clostridium histolyticum for Dupuytren’s contracture (CORD I).

16. Dr Calcagni is a speaker and consultant for Pfizer. He is also a senior fellow with the International Dupuytren Society, is financially supported by Pfizer.

17. Mr Warwick is a consultant hand surgeon at the University Hospital Zürich, Switzerland, and Head of the Hand Surgery and Research Unit.

18. Mr Warwick is a consultant hand surgeon at the University Hospital Zürich, Switzerland, and Head of the Hand Surgery and Research Unit.

19. Mr Warwick states that because revision surgery is technically much more difficult with dense disease or scarring, a skin graft is particularly suitable for patients with dense disease.

20. Patients should be instructed that Xiapex can be used during pregnancy. Xiapex can be used during breast feeding.

21. Patients should be instructed that Xiapex can be used during pregnancy. Xiapex can be used during breast feeding.

22. Hypersensitivity to the active substance: Patient should be instructed to contact their physician in case of symptoms of tendon rupture.

23. k 2013; 81: 425-428

24. Since the enzymes in Xiapex have some sequence similarity with human proteins, patients may develop antibodies to the therapeutic protein. This can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

25. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

26. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

27. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

28. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

29. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

30. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

31. J Clin Epidemiol

32. Preged Med J

33. J Hand Surg

34. Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to your local Pfizer office.

35. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

36. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

37. Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to your local Pfizer office.

38. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

39. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

40. Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to your local Pfizer office.

41. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

42. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

43. Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to your local Pfizer office.

44. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

45. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

46. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.

47. Patients should be instructed to contact their physician in case of symptoms of tendon rupture, skin or patients may develop antibodies to the therapeutic protein. As with any non-human protein medicinal product, this can be excluded. If this syndrome were to develop, it would usually be in patients treated with this method such as the very bent PIP joint.