

Yeovil District Hospital



NHS Foundation Trust

If you require this leaflet in any other format,
e.g., large print, please telephone:
01935 384256

FLEXOR TENDON INJURY
Advice Sheet for Patients following
the Early Active Movement Regime

Contact Telephone Numbers at Yeovil District Hospital are:

Rehabilitation Department (01935) 384358

Ward 6A (01935) 384322

Ward 8B (01935) 384385

Hand Therapy Service

www.yeovilhospital.nhs.uk

Please read this sheet carefully and if there is anything you do not understand, or if you require further information, speak to your physiotherapist.

INTRODUCTION

The damaged tendons in your hand have been repaired. The tendons are important as they link muscles to bone, which normally allows you to control movement of your fingers.

For **12 weeks** after the operation, your body is healing the repaired tendons. After this time the tendons should be fully strong for you to return to your normal activity. Prior to 12 weeks there are two particular risks to the tendons:

1. Weak tendons may **rupture** - that is, the repair site stretch or pull apart
2. The tendons may stick in the hand, as they try to heal themselves.

Should either of these problems occur, you may not recover full finger or wrist movement and this could be permanent. For these reasons, a specific exercise programme has been devised to carefully move the tendons. Your physiotherapist will explain this to you and teach you how to perform these exercises. You will also be advised on caring for your hand while it is healing.

It is obviously very important that you **FULLY UNDERSTAND** your rehabilitation programme. You are encouraged to ask questions, however simple they may seem.

Following surgery, the success of the tendon repair relies on your ability to closely follow our advice.

8 weeks	<ul style="list-style-type: none">• Discard splint• Increase the use of the hand. NOW ABLE TO LIFT THE WEIGHT OF A FULL KETTLE• Commence strengthening exercises• Return to work if moderate activity, no heavy lifting.
10 weeks	<ul style="list-style-type: none">• Full strain now allowed• Return to work, if safe• Return to driving, if safe.
12 - 14 weeks	<ul style="list-style-type: none">• Return to contact sports

Please note:

The above are guidelines only. Your physiotherapist will guide you through this timetable and ensure each stage is appropriate for your specific problem.

GUIDELINES

Day of operation	<ul style="list-style-type: none"> • Rest. The hand is kept elevated high in a Bradford sling.
0 - 48 hours	<ul style="list-style-type: none"> • Wound is inspected • Exercises begin • Plaster of Paris is replaced by a plastic splint • A light sling is provided • Home when wound and exercises are satisfactory and when out-patient physiotherapy has been arranged. This will involve an initial 40 minutes to 1 hour assessment and treatment session. • Subsequent treatment times will vary depending upon your condition.
10 - 14 days	<ul style="list-style-type: none"> • Stitches removed • Scar massage begins.
4 weeks	<ul style="list-style-type: none"> • Splint is made removable by adding velcro straps • Able to wash hand with care • New exercises for fingers and wrist begin.
6 weeks	<ul style="list-style-type: none"> • Use hand for light activity, NO MORE STRAIN THAN THE WEIGHT OF A CUP OF TEA, eg, eating, dressing, writing • Splints used for protection only, during “at risk” times, eg, when asleep, travelling, crowded places • Return to work if very light activity, eg, keyboard

SWELLING

To reduce the swelling in your hand, it is essential that you follow the instructions below:

- You will be supplied with a collar and cuff to keep your hand above your heart when standing and walking
- Remove it hourly to perform shoulder and elbow exercises as instructed by your physiotherapist
- When sitting or lying, support your arm and hand on pillows at heart height
- If you feel your dressings or splint are becoming tight, contact the Rehabilitation Department immediately. This can cause swelling or prevent its resolution.

Remember to elevate the hand 24 hours/day until advised otherwise by your physiotherapist.

EXERCISES

You should exercise your hand **every hour** leaving one hour between each exercise session.

Your physiotherapist will instruct you on the exercises you need to perform. It is extremely important that they are practised regularly in order for your hand to heal with maximum movement following injury and/or surgery.

The exercises are as follows:

HAND

Always perform warm up first followed by Active movement.

If you miss one hour’s exercise session, then only perform the warm up at the next session

Warm up - with uninjured hand, bend fingers/thumb on injured hand to get nail towards palm. Try to hold this position for a few seconds without help then straighten fingers to splint. **... 20 times every hour**

Active movement - (to be done after warm up only) Straighten fingers to get nails to splint then try to bend fingers/thumb to get nails towards palm without forcing movement. **... 5 times every hour**

SHOULDER - stretch your arm above your head ... *10 times every hour*

ELBOW - bend and straighten your elbow ... *10 times every hour*

These specific exercises are completely safe if performed correctly. HOWEVER, any other hand movement is unsafe and could result in the tendon repair breaking. Therefore, you should not in any way try and use your hand for normal daily activities until advised to do so by your physiotherapist.

SPLINTS

A splint will be made for you in the Rehabilitation Department to protect your repaired tendon/s. You will be advised on its use.

- i. The splint should be worn at all times, night and day.
- ii. DO NOT remove the splint for any reason. Removal of the splint will be under the direction and supervision of the surgeon or therapist only.
- iii. Do not adapt or tamper with the splint. If you have a problem with the splint or are experiencing any of the following, please contact the Rehabilitation Department:
 - a rash, red, blistered or broken skin
 - increased pain
 - swelling
 - the splint breaks
- iv. Do not wash the hand or attempt to clean the wound. When bathing or showering, place a plastic bag over the splint.

INFECTION

Please report quickly ANY signs of infection to your surgeon, GP or Physiotherapist, eg:

- increase in pain, not related to exercise
- increased redness
- increased swelling
- pain in the arm
- 'flu' type feelings, combined with any of the above.

DRIVING OR OPERATING MACHINERY

Do not drive or operate machinery until advised to do so by your consultant or physiotherapist.

HOLIDAYS

Avoid planning a holiday for the 12 weeks after the tendon repair.

SMOKING

Smoking delays the healing of your hand. Therefore, we advise you to stop smoking at this time.