# Post-Operative Instructions for De'Quervain's Tendonosis Release

### Purpose of surgery

The goal of the operation is to decompress the first set of extensor tendons in your thumb that are under too much friction within its anatomic tunnel at the level of your wrist. The consequence is the reduction or elimination of your pain.

### What to expect after surgery?

Your wrist and thumb will be supported by a forearm-based splint that extends to your thumb – a thumb-spica splint. You may have some numbness or tingling on the 'nail' side of your hand near your thumb and index finger from the local anesthetic used to help you with any post-operative pain (this should wear off within about 24 hours).

# What should you do to help recover?

While we do not anticipate significant swelling following this procedure, it would be helpful to keep your hand/wrist elevated as best you can for the first 24 hours after surgery. You can also apply an icepack or frozen vegetables to the thumb side the dressing at the level of your wrist to help keep swelling to a minimum.

To help your recovery, keep your fingers moving. Make sure you can make a fist with your fingers and completely straighten them. Your thumb and wrist will be immobilized, and you should not move them. Repeat these motions and efforts throughout the day, especially in the first few days following surgery to keep internal scarring from becoming an issue.

Keep your pain under control. While I do not anticipate significant pain, I want to make sure you are comfortable. Take the prescription pain medicine as prescribed for the first day and decide the next day to what extent you need it. Keeping yourself comfortable will allow you to keep your fingers moving and minimize internal scarring from the surgery.

### How should you take care of your dressing/wound?

The splint is intended to stay on until your first post-operative visit. We will remove it then to examine the wound.

Once the surgical dressing is removed, and you are fitted with a splint, keep the wound and your skin clean. Soap and water are an excellent skin cleanser, and it is OK to get everything wet in a shower with running water. Avoid immersing your wound under water until the skin looks well healed (1-3 weeks). Please do not use salves like Neosporin<sup>™</sup> or Bacitracin<sup>™</sup> for the wound. I would prefer soap and water or peroxide; and, I want you to keep it covered with a non-adherent bandage – your wound does not need air to heal, just cleanliness. The sutures are absorbable, and should 'fall' out by about 2-3 weeks and sometimes earlier. The wound might be covered with a thin layer of clear glue, and that will also come off in time.

# How should my hand respond to the surgery?

As I probably explained to you in the office, the speed and extent of your recovery is somewhat variable. It will probably take a handful of weeks for you to recover completely. Some notice substantial improvement within 2-3 weeks, others 4-6 weeks; some, even a little longer.

The key to your recovery will be following the post-operative instructions regarding exercises, and patience. Post-operative pain begets pain – so as you begin your exercise routines, and then ultimately begin to use your hand, mind your pain. The key is not to work through your pain but use it as sign that you are at the limit of what your wrist will tolerate for now.

### What should concern you?

Please refer to our website (www.HandCenterGA.com) for helping you to understand our general concerns following any operation. I want you to call us should any of these occur at 404-255-0226.

# When should you come in for your first Post-operative visit?

Your first visit will be within 7-10 days of the operation. That visit should be arranged during your pre-operative appointment. If not, call 404-255-0226 to make that appointment.

# Do you need therapy?

Most people do require therapy to recover from a De'Quervain's release. I will typically start your recovery with a simple home program, and then advance your program as you are recovering. Some patients will simply do better when under the guidance of a formal, supervised physiotherapy program. I will make that referral if you need it; but, if you want to start off with a therapist, I will happily refer you earlier.

### What activities can you do?

You can do anything that does not hurt with some exception. Everyone's pain threshold is different, but a reasonable guideline is limit yourself to about  $\frac{1}{2}$  pounds with the operative hand.