

NEWSLETTER

Third edition - 2015

Our clinics:

East Melbourne

Gipps St Consulting Suites
Suite 52, Level 5
166 Gipps St

Berwick

Berwick Specialist Suites
Suite 2, Level 1
50 Kangan Dve

Chadstone

Waverley Plastic Surgery
(cnr Huntingdale road)
169 Waverley Rd

Sunbury

Suite 11
33-35 Macedon St

PO Box 2320
Hawthorn 3122

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It's just a finger you'll be fine!

We have noticed an unfortunate trend in our patients; too many are disregarding seemingly small fractures in their hands. We are presented regularly with patients who attend our clinics numerous weeks or months after their initial injury. They usually complain of on-going pain, stiffness and deformity that could have been prevented with the correct treatment. Many people are under the impression that 2 weeks is enough time to protect a small fracture, rather than the required 4-6 weeks for bone healing to occur. Lack of sufficient time in the correct splinted position may lead to malunion or non-union of fractures – an unnecessary headache! Early referral to hand therapy allows patients the best chance for a full recovery from their hand fracture.



Welcome to the third edition of Re-Wired Hand Therapy's newsletter.

You will find:

- Updates on our clinics and staff
- Management of De Quervain's tenosynovitis
- Management of small fractures in the hand

Our newsletters are designed to keep in touch with you. With a team of eight Occupational Therapists, a Practice Manager and locations across Melbourne, we are able to assist you in the treatment and management of hand and upper-limb injuries.



From all of us here at Re-wired, we wish you a wonderful festive season! We will be joyfully working throughout December and January, closing only for the public holidays.

De Quervain's tenosynovitis

De Quervain's tenosynovitis is a condition that we treat regularly at Re-wired. It is described as stenosing tenosynovitis of the 1st dorsal compartment of the wrist. It is often caused by repetitive movements whereby the wrist is ulnarly deviated and the thumb is abducted or extended. A common example is a mother lifting up her baby repetitively.

The diagnosis is usually clinical and includes a positive Finkelstein's test and pain on palpation of the first dorsal compartment. This condition is four times more common in women than men. The average onset age is 35-55 years of age.

In most cases conservative management is prescribed initially including CSI, splint, and hand therapy, or all of the above. New research has shown that a splint in addition to a CSI is significantly more effective than a CSI alone.

De Quervain's is a stubborn condition to treat but we have had great success with most of our patients who are compliant with their splint and therapy programs.



A long thumb splint prescribed for De Quervain's. The splint is often required for 8 weeks to settle symptoms. A strengthening program is commenced once symptoms are under control.

So far in 2015 the therapists at Re-wired fabricated:

- 215 mallet splints
- 163 wrist splints
- 109 short thumb splints (wrist excluded)
- 109 finger gutter splints including trigger finger splints
- 64 long thumb splints (wrist included)

As well as many others.



Amy Geach
Hand Therapy
Innovation
Award

2015
FINALIST



AHTA CONFERENCE

Mel and Hayley attended the National Hand Therapy conference in October, held on the beautiful Perth coast. The conference presented some of the latest and greatest research in hand therapy to date, by local and international brains of the industry. We look forward to implementing this new research into our practice