

5. DUPUYTREN CONTRACTURE COMPLICATED WITH CARPAL TUNNEL SYNDROME

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Introduction. Dupuytren Contracture is a pathological thickening of the skin in the palm and at the base of the proximal phalanges, which develops into a hard knot or retractile band. Over time, it can lead to one or more fingers to contract irreversibly. Carpal Tunnel Syndrome is an abnormal hand condition that is caused by pressure on the median nerve in the radiocarpal joint. This can lead to symptoms such as paresthesias, numbness and loss of sensitivity in the hand, wrist and arm. Dupuytren Contracture is treated by fasciotomy, fasciectomy, percutaneous aponeurotomy or enzymatic injections, while the surgical treatment for Carpal Tunnel Syndrome is decompression of the transverse carpal ligament. These two diseases can have similar symptoms, but they are caused by different factors and may require different treatments.

Case presentation. In the Hospital of Orthopedics and Traumatology, march-august, 2021, underwent partial fasciectomy 2 patients with Dupuytren Contracture, grade II-III, which after 2 months were complicated by the Carpal Tunnel Syndrome, ultrasonographically confirmed - the median nerve with inflammation signs along the path, the common synovial vagina of the flexors dilated. There was performed decompression of the transverse carpal ligament, with neurolysis of the median nerve. Currently, both patients do not mention recurrences.

Discussion. Dupuytren Contracture has unknown etiology. All over the world, there is no single principle to define it, but it is supposed to be caused by repetitive trauma, genetics, smoking, diabetes, alcoholism, liver pathologies, etc. Carpal Tunnel Syndrome can manifest, also, after trauma, surgery or other inflammatory processes. The literature is conflicted in regard to these conditions as a consequence after intervention for common pathologic conditions of the hand, as well as regarding their management. There are not so many cases in our experience when Dupuytren Contracture is complicated by Carpal Tunnel Syndrome, worldwide it has a 4,6% incidence.

Conclusion. Inflammation caused by surgery for Dupuytren Contracture was the first causative trigger for the onset of the Carpal Tunnel Syndrome. Also, during these 2 months wearing the splint and performing exercises that represented repetitive movements in the radiocarpal joint, were the factors that contributed to the evolution of the disease.