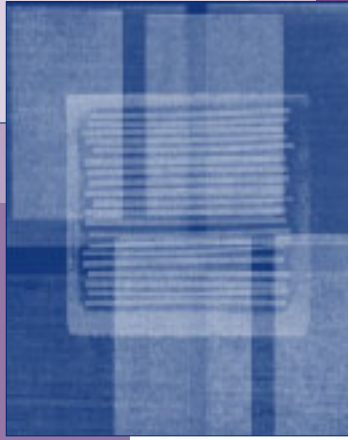


FLEXOR TENDON INJURIES



WHAT ARE...

Flexor Tendon Injuries?

Your flexor tendons are located on the palm side of the wrist, fingers, and thumb. The tendons attach to muscles in the forearm and control your ability to curl your wrist, fingers, or thumb. There are nine flexor tendons that pass over the wrist into the hand.

Depending on the size and location of the injury, a laceration can occur to an isolated tendon or to multiple tendons. If nearby nerves were also cut, the area may become numb.

What Causes Flexor Tendon Injuries?

A deep cut by a knife or broken glass, or a sudden jerk from a contact sport like football can cause your flexor tendons to be torn partially or completely.

How Can Flexor Tendon Injuries Affect You?

The flexor tendons connect the muscles in the forearm to the bones in the hand. Without intact flexor tendons, you are not able to bend your finger, which may affect the use of the hand with self-care, work, and play activities. If numbness results from a severed nerve, you may lose the ability to perceive hot and cold or sharp and dull in that specific area, which may make that area vulnerable to re-injury.

What Can Happen if You Don't Seek Treatment for Flexor Tendon Injuries?

If you choose not to seek treatment for a lacerated or torn flexor tendon, you are choosing to continue life with compromised use of your hand. How successful you may be will depend on

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your individual case, your life demands, and the extent of your injury. For example, a person may decide to live without being able to bend the tip of his or her small finger. It may be less likely that a person with multiple tendon involvement would decide to live without being able to bend any joints on his or her long finger. It is important to seek treatment as soon as possible to ensure a successful outcome.

What Are Some Options for Correction of Flexor Tendon Injuries?

An examination by a physician is necessary to determine the extent of injury, and the physician will refer you to a qualified hand surgeon to carry out the repair. The only treatment for a lacerated tendon is surgical repair followed by hand therapy. The surgeon will usually open the area with a zigzag incision. After locating the ends of the tendons, they are stitched back together. In some cases, a tendon graft may be indicated if the tendon has shortened and cannot be brought back to its original length. Any other soft tissue and nerve repair is also done at this time. The surgery is usually completed on an outpatient basis, and you will leave the operating room in a bulky dressing and cast. The therapy program is generally initiated within the first post-operative week and can last 8-12 weeks.

What Does Your Hand Therapist Do to Help Correct this Condition?

Rehabilitation after a flexor tendon repair is a challenge for the surgeon, the

Disclaimer: These education topics should not be construed as including all proper methods of care or excluding other acceptable methods of care reasonably directed to obtaining the same results. The final judgment regarding any specific procedure or treatment must be made by the hand therapist in light of all circumstances presented by the patient and the resources available.

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therapist, and the patient. It is a balance between protecting the repaired tendon and applying the stress needed to increase motion and strength of your healing tissues. Your hand therapist will provide you with careful ongoing education in order to promote the most successful outcome and to avoid complications. Your hand therapist will make a custom splint to maintain your hand in the best position for healing. He or she will also train you in precise exercises to help you heal, starting 3-7 days after surgery and done several times a day as part of your home exercise program. As the tendon heals, strengthening will slowly be added for the tendon and muscles. Your therapist will discuss with you the performance of activities of daily living and aid you in modifications as necessary. Approximately 4-5 weeks after surgery, you will be able to use your finger in normal light activities. Participation in non-competitive sports may be possible after 10-12 weeks. If your job duties do not require use of the affected hand in lifting, pushing, or pulling, you may be able to return to work, with modifications from your hand therapist, within a couple of weeks. If your job does require heavy work or power tools, your surgeon and therapist will discuss when they anticipate your safe return to work. Regaining full function depends on many factors, but most important is your participation in hand therapy.

