

Study finds initial outcomes comparable for differing Dupuytren contracture treatments

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For patients with Dupuytren contracture, initial outcomes are similar for surgery, needle fasciotomy, and collagenase, but outcomes are superior for surgery at two years, according to a [study](#) published online Feb. 12 in the *Annals of Internal Medicine*.

Mikko Petteri Räisänen, M.D., from Kuopio University Hospital in Finland, and colleagues compared the effectiveness of [surgery](#), needle fasciotomy, and collagenase injection at three months and two years in a randomized superiority trial conducted at six [public hospitals](#) in Finland.

A total of 302 patients with treatment-naïve Dupuytren contracture were randomly assigned to receive surgery, needle fasciotomy, or collagenase (101, 101, and 100 patients, respectively).

Overall, 97 and 94 percent of participants completed the three-month and two-year follow-ups, respectively. The researchers found that at three months, success rates, defined as greater than 50 percent contracture released and reaching the patient acceptable symptom state, were similar (71, 73, and 73 percent for surgery, needle fasciotomy, and collagenase, respectively).

Compared with both needle fasciotomy and collagenase, surgery had superior success at two years (78 percent versus 50 and 65 percent, respectively; adjusted risk differences, 0.30 and 0.13, respectively).

"Longer follow-up of study participants will determine whether the superior success rates of surgery persist as an increasing number of recurrences are addressed, and whether the lower rate of reinterventions with surgery can offset higher initial treatment expenses," the authors write.

More information: Mikko Petteri Räisänen et al, Surgery, Needle Fasciotomy, or Collagenase Injection for Dupuytren Contracture, *Annals of Internal Medicine* (2024). [DOI: 10.7326/M23-1485](https://doi.org/10.7326/M23-1485)

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