

Patient Information



Orthopaedic Department

Finger fusion DIP joint

A joint fusion is an operation that involves removing the damaged ends of the joint and compressing them together until the bone has grown across the joint and the joint is stiff.

What is the cause?

Finger fusions are often performed for pain caused by arthritis. The most common joint to be fused is the distal interphalangeal joint (DIP joint). This is the end finger joint, just behind the nail.

Symptoms

People often present with a painful, lumpy joint and stiffness. The articular or joint cartilage on the ends of the bone wears away, and the exposed bones rub against each other, causing pain. A small joint fusion which stiffens the joint can be very successful at reducing this pain. There are very few functional limitations as a consequence of fusing the DIP joint.

Treatment

Surgery

The surgery usually takes place under general anaesthetic, under X-ray control. An incision is made on the back of the joint. The tendons are divided and the underlying bone prepared so that the two ends of the bone are freshened and come into close contact. These are then held with a variety of fixation devices, most commonly stainless steel wires or screws. The wires are kept in place until the bone has united, usually somewhere between four and eight weeks. There are a number of different methods of fixation of the DIP joint and these include exposed wires, buried wires under the skin or internal screw fixation.



Patient Information

Please note

Before you come into hospital for your surgery please make sure that you have removed all jewellery, especially rings on the arm/ hand that is to be operated on. Also please take off any nail varnish, gel or false nails

What are the possible complications?

The main risk is the bones not fusing together. This may mean further surgery is needed to try and achieve fusion. This occurs in approximately 10% of cases. Other risks are infection and damage to the nail.

How long will I be off work?

You can expect to return to work within a few weeks of surgery depending upon the nature of your job. Jobs involving heavy work may require you to remain off work for up to six weeks.

When can I drive?

You may find driving difficult during the first few weeks after the operation. Before attempting to drive you should be able to make a complete fist and grip a hard surface without pain (e.g. grip the back of a dining chair).

Further information sheets will be available to you when you leave the hospital, please ask staff for a copy of:

- Post Operative Hand and Arm instructions
- Care following a general anaesthetic

In the event of you experiencing any problems please contact your GP or the Day Surgery Unit.

For further information on your procedure please contact The Day Surgery Unit on 024 7696 6861 or 024 7696 6868

Further Information

If you need further information please contact your Therapy Department:

University Hospital, Coventry and Warwickshire: Tel 024 7696 6016

Rugby, St Cross Hospital: Tel 01788 663257 For further information please visit our hand service web site <http://tinyurl.com/uhcwhand>

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 6861 and we will do our best to meet your needs.

Patient Information

The Trust operates a smoke free policy

Document History

Author	Lynne Nicholls
Department	Orthopaedics
Contact Tel No	26013
Published	November 2011
Reviewed	June 2019
Review	June 2021
Version	4.2
Reference No	HIC/LFT/1326/11