

Dupuytren's Disease in Adults Surgery

VERSION CONTROL

Version:	5.0
Ratified by:	Governing Body Meetings in Common
Date ratified:	20 March 2019
Name of originator/author:	Joint CCG Clinical Commissioning Policy Development Group/NHS England
Name of responsible committees:	Clinical Quality and Governance Committee
Date issued:	1 April 2019
Review date:	March 2022

VERSION HISTORY

Date	Version	Comment / Update
April 2009	1.0	Previous PCT policy
June 2013	2.0	Version to Governing Body – approved on 12 June 2013
September 2016	3.0	Ratified by Governing Body 1 September 2016
March 2018	4.0	Ratified by Governing Body 29 March 2018
March 2019	5.0	Ratified by Governing Body meetings in common 20 March 2019

Commissioning policy: Warwickshire North CCG (WNCCG)

Evidence-Based Intervention Commissioning policy:

Dupuytren's Disease in Adults surgery

Treatment	Dupuytren's Disease in Adults surgery
Indication	Dupuytren's Disease
Treatment:	<p>Treatment is not indicated in cases where there is no contracture, and in patients with a mild (less than 20°) contractures, or one which is not progressing and does not impair function.</p> <p>An intervention (collagenase injections*, needle fasciotomy, fasciectomy and dermofasciectomy) should be considered for:</p> <ol style="list-style-type: none"> a. finger contractures causing loss of finger extension of 30° or more at the metacarpophalangeal joint or 20° at the proximal interphalangeal joint <p>OR</p> <ol style="list-style-type: none"> b. severe thumb contractures which interfere with function <p>NICE concluded that collagenase should ONLY be used for:</p> <ol style="list-style-type: none"> a. Participants in the ongoing clinical trial (HTA-15/102/04) <p>OR</p> <ol style="list-style-type: none"> b. Adult patients with a palpable cord if: <ul style="list-style-type: none"> • there is evidence of moderate disease (functional problems and metacarpophalangeal joint contracture of 30° to 60° and proximal interphalangeal joint contracture of less than 30° or first web contracture) plus up to two affected joints <p>AND</p> <ul style="list-style-type: none"> • needle fasciotomy is not considered appropriate, but limited fasciectomy is considered appropriate by the treating hand surgeon <p>* Collagenase Clostridium Histolyticum (Xiapex®) The CCG approves the prescribing of Collagenase Clostridium Histolyticum injection (Xiapex®), by HAND SURGEONS only, in an outpatient setting, for the treatment of Dupuytren's contracture with a palpable cord in adults in accordance with NICE TA459. NICE TA459 (26 July 2017) recommends that people who meet the inclusion criteria for the ongoing clinical trial (HTA 15/102/04), comparing Collagenase Clostridium Histolyticum (CCH) to limited fasciectomy, are encouraged to participate in the study.</p> <p>Prior approval from the Clinical Commissioning Group will be required before any treatment proceeds in secondary care.</p>
Diagnostic and Procedure Codes	T521, T522, T525, T526, T541, M720
Equality Impact	See NHS England Equality and Health Inequalities – Full Analysis Form