

# Finger Flexor Tendon Injury

## Early active motion

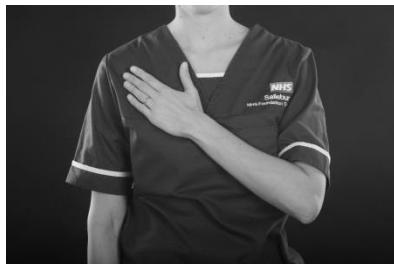
The injury you have sustained is to the tendon(s) that bend the fingers. You have received very delicate surgery to repair the tendon(s) that bend the fingers.

Although the tendon(s) have been repaired surgically, it will take 2-3 months for the repair to be strong enough to cope with the normal use of your hand.

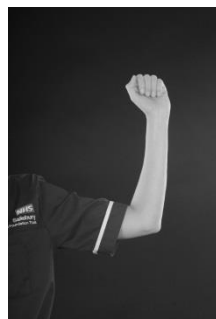
## Care of your hand after the operation

### Preventing swelling

If you let your hand hang down, it will make any swelling worse. This will make your hand painful and stiff and stop it from working properly. Your hand must be kept above the level of your heart until it is no longer swollen, this may take a few weeks. At night you should rest your hand on pillows.



To stop your hand becoming too swollen and to stop your elbow and shoulder from becoming stiff you will need to do 'pumping exercises' with your whole arm 10-15 times every half an hour. This is done by reaching up towards the ceiling and then back down to shoulder level.



## Looking after your wound

To assist with healing and make it easier to do your exercises, your wound will be left with minimal or no dressings. It is important that you keep your wound clean and dry until it is fully healed. You must monitor your wound for signs of infection which include increasing pain and swelling, redness and discharge/fluid which may be foul smelling. If you are concerned that your wound may be infected please contact the Plastic Dressings Clinic on the telephone number below.

## Protecting the repaired tendon from breaking

In order to protect your repaired tendon, a light plastic splint will be made which you must wear at all times until your tendon has healed. Your therapist will advise you when you can start to remove your splint.

## Exercises

Normally as you move your fingers your tendons glide in your hand. After a tendon repair they will not glide so well. The following exercises will help your tendon(s) to glide as it heals.

### Weeks 1 – 5

Your splint should be worn at all times.

You should do the following exercises as instructed:

#### 1. **Passive Hook:**

Push each of the fingers, one at a time, into a hook position, using the other hand. Hold for 2 seconds, repeat 10 times. Then, using the other hand maintain a 30 second hook stretch on each finger, repeat this twice. Repeat every 1-2 hours.



2. **Passive Composite flexion:**

Push each of the fingers, one at a time, into your palm, using your other hand.  
Straighten the fingers all together without using the other hand.  
Hold for 30 seconds on each finger, repeat 2 times, every 1-2 hour(s).



3. **Active IPJ (interphalangeal joint) extension with MCPJ (metacarpophalangeal joint) flexion**

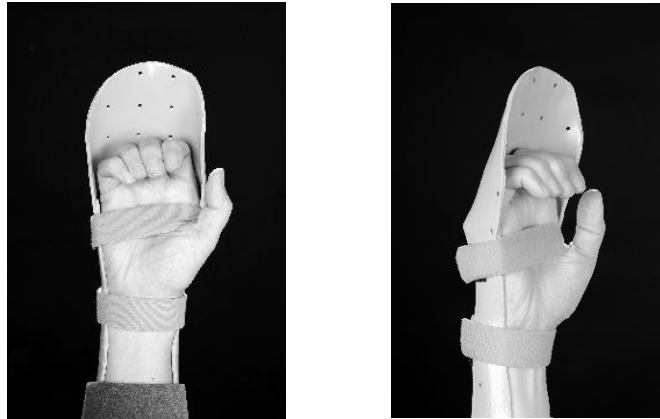
Push down on the back of your fingers with your other hand or a 'lolly stick' and straighten the middle and tip joints of your fingers.  
Hold for 2 seconds, repeat 5-10 times, every 1-2 hour(s).



**4. Active Modified Hook:**

Gently straighten your fingers to the back of your splint, then **gently** curl all the fingers together, starting movement at the tips, towards a hook position. Please note that your wrist should be relaxed back into the splint.

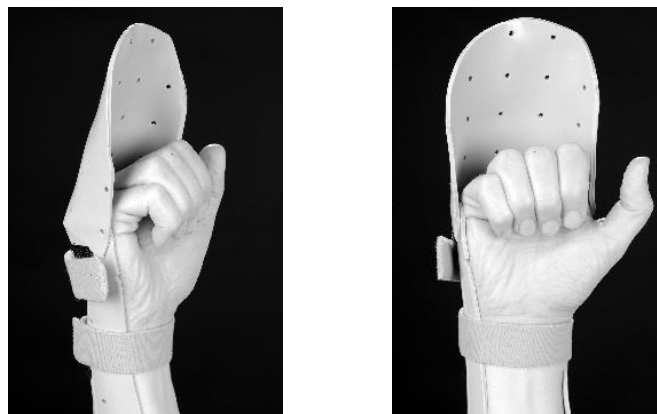
Hold for 2 seconds, repeat 5-10 times, every 1-2 hour(s).



**5. Active Composite Flexion:**

Gently straighten your fingers to the back of your splint, then, **gently** curl the fingers, all together, down towards your palm without using your other hand. You should not try to make a full fist at this stage.

Hold for 2 seconds, repeat 5-10 times, every 1-2 hour(s).



**Optional Additional Exercises (to be prescribed by therapist as required):**

**6. Active flat fist:**

Gently straighten your fingers to the back of your splint, then keeping your fingertips straight, bend your finger middle joints to allow your tips to reach toward the base of your palm. Do this without using your other hand. Hold for 2 seconds, repeat 5-10 times, every 1-2 hour(s).



**7. Tenodesis:**

Undo the top two straps on your splint. Gently lower your hand and wrist forward away from the splint, allowing your fingers to straighten as you do. Hold for two seconds at this point. Gently raise hand and wrist back into splint, allowing fingers to curl at the same time. Do this without using your other hand. Hold for 2 seconds, repeat 5-10 times, every 1-2 hour(s).



**Function:**

You should not use your affected hand for anything, until advised by your therapist.

Additional advice/exercises

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**Weeks 5 – 6**

Your splint should be worn at night and for protection during the day when going out.

You will be taught exercises by your therapist to improve the movement of your hand and wrist. If you do not do the exercises exactly as instructed, your hand may become stiff or you may risk damaging the tendon repair.

As advised by your therapist, you can use your affected hand for light functional tasks out of the splint.

**Weeks 6 – 8**

At this stage you usually do not need to wear your splint any more.

You will be instructed on further exercises and activities to improve movement, strength and use of your hand.

At this stage you will be advised by your therapist how much you can use your hand.

**Weeks 8 – 12**

You can return to normal daily activities and driving at this stage.

You will also be advised by your therapist whether you can return to your specific job or sport.

**Weeks 12+**

Normal use of your hand with no restrictions.

**Points to remember**

- Keep your hand above your heart all day and night
- Do 'pumping exercises' every half an hour
- Do your exercises as frequently as you have been advised to do
- Do not remove your splint unless you have been advised to do so
- Do not attempt to alter your splint
- Do not get your splint wet
- Do not use your injured hand for anything unless you have been advised to
- Do not drive until you have been told you can

## Contact numbers

Hand therapy:	01722 345530	(08:00 – 17:00 Monday to Friday)
Hospital switchboard:	01722 336262	
Plastic Dressing Clinic nurses:	ext 3254	(08:00 – 17:00 Monday to Friday)
Odstock ward:	ext 3507/3139	(out of the above hours)

Your GP or NHS 111 is another source of assistance out of hours.

## Follow up

You will be seen in the Outpatient Department within five days of your surgery. After this you will be seen every one to two weeks. Depending on where you live, you may be referred to a local hospital for hand therapy after your second appointment.