

Collagenase injection versus limited fasciectomy surgery to treat Dupuytren's contracture in adult patients in the UK: DISC, a non-inferiority RCT and economic evaluation

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Plain language summary

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Plain language summary

Dupuytren's contracture happens when fibrous tissue builds up and over time bends the finger(s) into the palm, causing problems with hand function. To treat this, surgery is usually used to straighten the finger. A less intrusive alternative is an injection (collagenase), which softens the tissue after which the finger is moved to straighten it.

The Dupuytren's interventions surgery versus collagenase trial recruited 672 patients who were equally and randomly assigned to have either surgery or collagenase injection. The study assessed whether the injection was as good and as safe as surgery at straightening the finger and how long the finger remained straightened.

For up to 2 years after treatment, the participant's hand function and general health were assessed. Some participants provided photographs to monitor changes to the finger, and some were asked about their experiences of Dupuytren's contracture and treatments.

We found:

- Hand health improved following both treatments. Initially, the injection treatment improved hand health more than surgery. However, by 1 year, surgery improved hand health more than the injection treatment.
- Recovery of hand function was quicker for participants who received the injection; however, they were more likely to need further treatment (i.e. further care and/or re-intervention). Participants said that the less positive longer-term outcome was acceptable for a better treatment experience.
- For both treatments, interviews found that participants were happy with the hand improvement they experienced at 3 months after treatment.
- More than half of participants had no complications, moderate or severe complications were rare, and participants who had surgery had more of these.
- The injection was cheaper but less effective than surgery at 1 year and was considered good value for money. However, by 2 years surgery became the better option due to its greater improvement in health benefits. Participant-taken photographs can help monitor Dupuytren's contracture but do not give the same results as measurements taken in a clinic.

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