Discuss Hand Infection

By

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Out line

- Introduction
- Relevant Anatomy
- Aetiopathogenesis
- Specific infections
- Management
- Complication
- Conclusion

Introduction

Hand infection

is the infection of the Confined Spaces, Joints, Tendon Sheaths and Bursae of the hand.

The hand is a tool with which the individual can receive information from the outside world and then act upon it. It must be supple, sensate, pain-free and co-ordinated

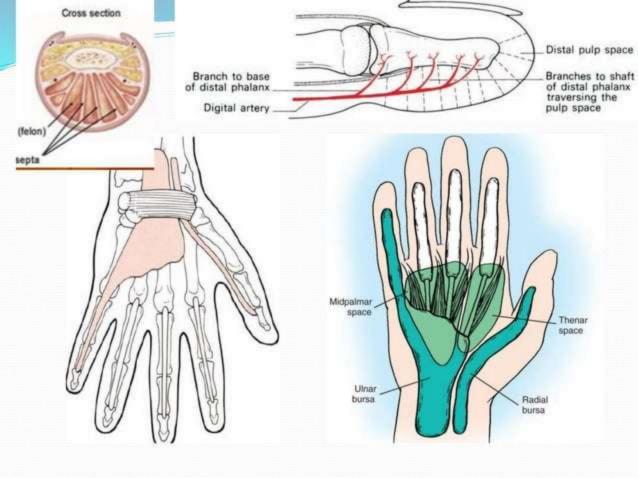
History

- Surgery derived from "chirurgerie" meaning 'hand work'
- Allen B. Kanavel 1938

Relevant Anatomy

 The spaces of the hand are of practical significance because they may become infected and distended with pus

- 1- the superficial pulp spaces of the fingers
- 2- the synovial tendon sheaths of the 2nd, 3rd and 4th fingers
- 3- the ulnar bursa
- 4- the radial bursa
- 5-the midpalmar space
- 6- the thenar space



- Edema in hand infections is commonly dorsal, irrespective of the location of the infection
- Palmer skin is relatively tight and inelastic
- Palmer aponeurosis is also tight and inelastic

Aetiology

- Bacterial e.g Staphylococcus aureus (commonest) streptococci, clostridium, anaerobes Mycobacterium species, pasturella multocida (Animal bite) Eikenella corrodens (human bite)
- Fungal eg Candida Albicans
- Viral infections eg Herpes Simplex Virus

Predisposed individuals

- Manual workers
- House wives
- Dish washers
- Laundry men
- Immunocompromised
- Diabetics
- Dental workers
- Nail chewers

Mechanisms of entry

- Spontaneous
- Trivial scratches or injuries (domestic accidents)
- Major injuries
- Bites from animals
- Human bite

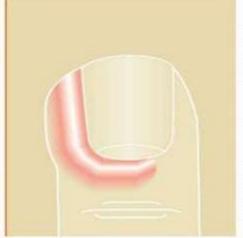


Specific infections

1- Paronychia / eponychia

- These are infections that develops along the lateral nail fold or base of the fingernail
- Redness of the skin on the side or base of the nail accompanied by localized tenderness is virtually pathogromonic





2-felon

- A felon is a subcutaneous abscess in a closed – space of the pulp of a finger
- A more serious and usually more painful





3- Herpetic whitlow

is a viral infection of the hand, usually on the fingers, caused by a herpes simplex virus. The condition, characterized by small, swollen, painful blisters, and sometimes numbness,



4- Flexor tenosynovitis

- Infection of the Tenosynovial area
- Commonly involves the flexor tendon sheath
- Most important of all hand infections
- Infection frequently follows trauma at the flexor creases of the fingers- distal crease is most implicated
- Infection may be secondary from other sites in the hand

kanavel's signs

- Generalised swelling of finger
- Tenderness over flexor tendon sheath
- Flexed position of finger
- Pain on attempted extension of finger



5- Deep space infection

- Infections in these spaces present a serious surgical problem
- Good knowledge of the fascial anatomy is essential for proper treatment

Mid-Palmer space-

- Infection usually results from tendon sheath infection of middle or ring fingers
- Obliteration of the concavity of the palm and the presence of a slight bulging are pathognomonic

Thenar space infection

Involved by direct extension of infection of the index finger

Xterise by

- widening of thenar area
- dorsal edema and ballooning of thenar area
- Flexion of distal phalanx but the thumb is not rigid

Hypothenar Space

- Located deep to the hypothenar eminence
- Involvement is usually by direct implantation
- To aid diagnosis there is relative lack of palmar swelling and absence of involvement of the tendon sheath

Deep Fascial Space Infections

- Dorsal subaponeurotic abcess
 - Swelling and erythema on dorsum of hand
 - · Pain with passive movement of extensor tendons
 - Looks like cellulitis
- Subfacial web space infection
 - Secondary to infection of palmar space
 - · Spreads dorsally "collar button abcess"

5- Bites

Animal or human bites can lead to infection

6- Pilonidal sinus;

A hair implanted in the palm or web space can cause a recurrently infected cyst resulting in discharging sinus

- 7- Septic arthritis
- 8- Osteomyelitis
- 9- mycobacterium infection

Managment

- Early, accurate, careful assessment improves outcome
- History
 - -hand pain, swelling, loss of function, drainage
 - -penetrating trauma, animal bites
 - -onset, duration
 - -constitutional symptoms- eg fever
 - -hand dominance
 - occupation
 - -premorbid Diabetes

- Examination
 General ill looking, painful distress, febrile
 - 2. Specific skin- point of trauma, bruises, bite point, pointing of the abscess soft tissues- edema bones –deformity (in osteomyelitis) joint –swelling (in septic arthritis) limitation of ROM of hand Kanavel's signs

- Investigations
 - Aspirate/ pus for m/c/s
 - -Tissue biopsy for histology/ afb
 - FBC, ESR- ↑wbc with neutrophilia, ↑ESR
 - RBS- diabetes
 - X-rays- hand



Treatment

1- Prevent swelling by Elevating hand



- Use of arm sling above the level of heart
- Elevation on pillow
- · Hanging the affected limb

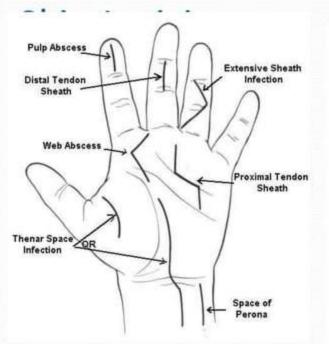
2- medications

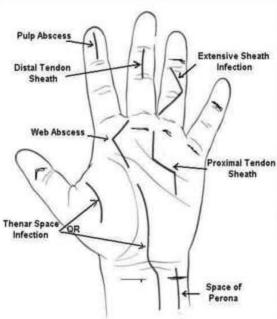
- Antibiotics ;- broad spectrum , after m/c/s sample is obtained
- TT / ATS
- Analgesia- opioid /NSAID
- Acyclovir
- AntiTB



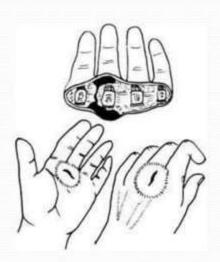
3- Surgical treatment

- I- Surgical Drainage
- if pus is present
- Adequate anaesthesia (G.A / Digital block)
- Tourniquet to ensure bloodless field
- -Appropriate positioning of hand
- -Tendon sheath/ deep space pus needs irrigation





Coller stud abcess



Paronychia/ eponychia



- Bites should be explored, debrided, cleaned and managed with broad-spectrum antibiotics
- Wound is left open
- The pus obtained is sent for m/c/s
- Hand should be re examine 24hrs after drainage

Splintage

- Splint in the position of safe immobilisation (Edinburgh position)
- Removable splint to allow for wound dressing



- All infections need early mobilization once inflammation Subsided
- Active / passive joint physiotherapy

Complications

- Hand infections
- Tendon destruction
- b) Sepsis
- Functional disability
- d) Extension into the forearm
- e) Compartment syndrome
- Septic arthritis
- g) Osteomylitis
- h) Contractures

- Surgical intervention
- a. injury to hand structures

Conclusion

 Hand is an important tool to livelihood, Rapid precise diagnosis and quick surgical intervention makes significant difference between patient loosing his hand or getting back his livelihood

Referances

- Canale: Campbell's Operative Orthopaedics, 10th ed. 2003 Mosby, p.3814
- Habif: Clinical Dermatology, 3rd ed. 1996 Mosby, p.343
- Marx: Rosen's Emergency Medicine: Concepts in Clinical Practice, 5th ed, 2002. Mosby, pp.529-532
- Tintinalli: Emergency Medicine a comprehensive study guide, 2000, McGraw pp.1885-1890.
- Loius S. etal , Apley's system of orthopaedics and fracture ninth ed. 2010 p429-435
- DR Muna Chira , hand infection ppt.
- Opart pinchai MD, Hand infection, hand infection manual 2011
- DR knight, Hand infection, pub. Hand infection surgeons los Angelis
- Russel R. G. etal baily and loves short practice of surgery, 24th edition Arnord 2004
- · Hand infection, american society for surgery of hand

Thank U for listening

