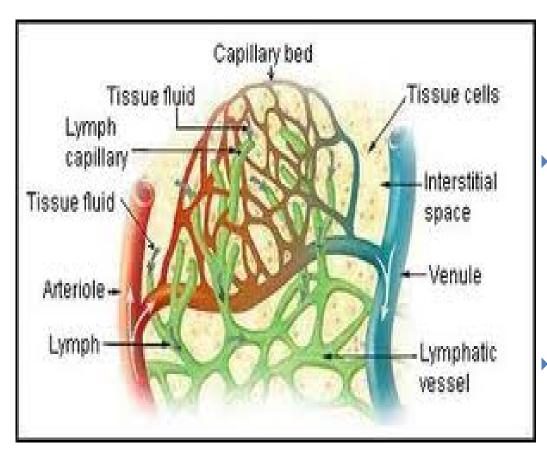
The Traumatic "Fat" Hand What does therapy do?

Laura Karls, OTR/L, CHT

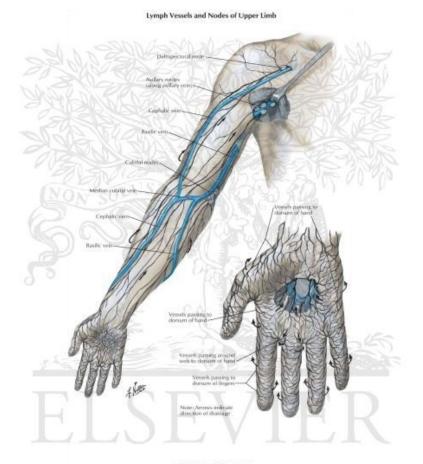
A brief review of the anatomy

- Arterial system brings oxygen and nutrients to the cells
- Venous system removes waste and carbon dioxide
- Lymphatic system removes the small proteins that leak into the interstitium and return them to the venous system



- The exchange of nutrients takes place at the level of the capillaries-primarily through diffusion and filtration.
- There is a constant exchange of fluid between the intercellular tissue spaces and the blood plasma across the capillary membrane.

Lymphatic flow



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What is edema?

- Edema is the accumulation of excessive fluid in the intercellular space
- The interstitial fluid volume can increase to several hundred percent above the normal free fluid volume in severe edema cases
- Capillary permeability is increased following external injury, operative trauma, and burns
- Increase fluid can cause pain, decrease ROM and decrease in function

Types of Edema

- Pitting edema-soft to touch and displaces leaving a dent
- Brawny edema occurs when the fluid becomes clotted with fibrinogen-firm to the touch
- Lymphedema-accumulation of protein rich fluid

1. Etiology

- nature of the injury
- stage of wound healing
- any other medical issues (i.e. renal, liver, cardiac, medications)

- 2. Start at the trunk
- Only the lymphatic system can reduce high protein edema
- Inhalation causes changes in tissue pressure resulting in negative pressure thereby draining fluid from the periphery towards the trunk
- Diaphragmatic breathing is very important
- In sense a vacuum is created

- 3. Frequent exercise
- Exercise increases lymphatic pumping speed by 10-30 fold
- Beneficial to start with the trunk and work down the arm in segments

4. Keep Compression Light

- One study showed that 60 mmHg of pressure begins to collapse the initial lymphatics and 75mmHg collapses them
- Gentle stretching of the skin will stimulate the initial lymphatics

- 5. Neutral warmth
- Lymph is most mobile between 71.6-105.8 degrees of Fahrenheit
- Body temperature is ideal with the use of other aids such as compression wraps

Edema and the 3 stages of wound healing

Inflammatory phase

- Usually lasts first 3–5 days post injury
- Edema is liquid soft and easy to mobilize and reduce
- Consists mainly of water and dissolved electrolytes
- Excessive edema can inhibit wound healing by decreasing arterial, venous, and lymphatic flow
- Goal: pain control, AROM in an elevated position, rest, ice and post op dressing

Edema and the 3 stages of wound healing

Fibroplastic or Proliferative phase

- Begins 3-5 days post and can last 2-6 weeks
- Fluid becomes more viscous from the elevated protein content
- Causes fibrosis and thickening of the tissues with subsequent shortening of ligaments/tendons
- Greater the edema or longer lasting the more extensive the scarring>greater pain, adhesions, disfigurement, and disability
- Promote AROM and tendon gliding

Edema and the 3 stages of wound healing

Maturation

- Initiated as fibroplasia ends
- Edema is hard, thick and brawny as the result of connective tissue infiltration and fibrosis
- May compromise arterial flow causing anoxia and impaired metabolic circulation

Now it's there... How do we measure it

- Volumeter
- Circumferential
- Visual



How does a therapist treat it?



Elevation

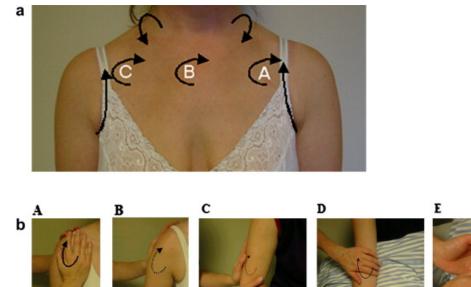
- Enhances venous and lymphatic flow by gravity
- Should be started immediately after surgery
- Entire limb should be slightly above the heart
- Precaution taken with a replanted hand/finger

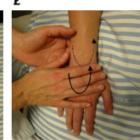
Massage

Manual Edema Mobilization (MEM)

- Created by Sandra M. Artzberger in 1995
- Method of edema reduction based on methods to activate the lymphatic system
- Key principles:
- light massage
- Exercise pre/post
- Massage is in a "clear" and "flow" pattern
- Reroutes around scars
- Home exercise program
- Bandaging when necessary

Massage





Compression





Coban

Edema gloves

Compression





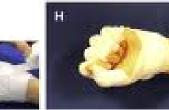
















Hand wrap

Lymphedema wrap

Kinseotape





Electrical Modalities

- High volt pulse direct current (HVPC)
- Repels negatively charged proteins in the edematous interstitial spaces
- Suggested a fluid shift occurs
- Maybe beneficial in any of the three stages, however avoid muscle contractions in the inflammatory stage which may increase clotting time.

In conclusion:

- Best treatment is prevention and early treatment
- Enhancing arterial system, venous return, and lymphatic flow
- Control of edema will optimize hand function