

Percutaneous Needle Aponeurotomy (PNA) – Patient Education

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Performed in the procedure room under local anesthesia.

Surgical Procedure

During a percutaneous needle aponeurotomy (PNA), a fine needle is inserted through the skin to divide the thickened cords in the palm caused by Dupuytren's contracture. These cords prevent the fingers from fully straightening. By carefully weakening and releasing the cord with the needle, the affected finger can be extended, improving motion and function.

This is a minimally invasive procedure performed without an incision, and sutures are not required. A light dressing or bandage is applied afterward.

You will have immediate mobility of your fingers and wrist. You may feel some numbness for a few hours from the local anesthetic. Mild soreness, bruising, and swelling in the palm and fingers are normal.

Wound Care

- Since this procedure does not require stitches, only a small bandage is needed to cover the puncture sites.
- Keep the dressing clean and dry for the first 24–48 hours.
 - You can cover your hand with a plastic bag when showering.
- After 48 hours, you may remove the bandage and gently wash your hand with soap and water.
- A small adhesive bandage can be applied if needed until the skin puncture sites are fully healed (usually 2–3 days).
- Do not soak your hand in water (no swimming, baths, or hot tubs) until the puncture sites are fully closed.
- Use ice packs (20 minutes at a time, with a thin cloth between the ice and skin) to reduce swelling if needed.

Pain Management

- Pain after PNA is typically mild.
- Use Tylenol (acetaminophen) or ibuprofen as needed for discomfort unless otherwise directed.
- Swelling or aching is often worse at night; elevating your hand above heart level when resting helps reduce this.

Activity

- You may begin using your hand for light activities such as eating, dressing, or typing immediately after the procedure.
- Avoid heavy gripping or lifting for the first 48 hours.
- Gentle stretching and finger straightening exercises are encouraged to maintain motion.
- Most patients return to normal activities, including sports or hobbies, within several days.

Post-Op Appointments

You will have a follow-up appointment 14–21 days after your procedure with Dr. Weil or one of his physician assistants to check healing and review hand function.

A separate hand therapy appointment should already be scheduled, or should be arranged within a few days after your procedure. At this visit, your therapist will fabricate a night-time extension splint to maintain your finger(s) in a straightened position. You should wear this splint every night for six weeks after the procedure. Some patients may also benefit from additional therapy to maximize motion and reduce recurrence risk.

FAQ's

Can I drive myself home?

Yes. Since only local anesthesia is used, most patients are comfortable driving themselves home.

How soon can I type or use my phone?

You may use your hand for light activities such as typing or texting right away.

Do I need a splint after the procedure?

Yes. You should schedule, or may already have scheduled, an appointment with a certified hand therapist for fabrication of a night-time extension splint. You should wear this splint at night for 6 weeks after your procedure to help maintain finger extension.

How soon can I return to sports or gym activities?

Most patients resume activities such as golf, tennis, or gym workouts within a week, once soreness subsides and skin puncture sites are fully healed.

What kind of anesthesia will I have?

This procedure is performed with a local anesthetic injected into the palm. No sedation is typically required.