



Oxford University Hospitals
NHS Foundation Trust

Upper Limb Spasticity Clinic

Information for patients



Who is this leaflet for?

You have been given this leaflet as you will be attending the Upper Limb Spasticity Clinic, at the Oxford Centre of Enablement (OCE). In this clinic, we focus on assessing patients who have problems with their hand and arm due to muscle stiffness.

What is Upper Limb Spasticity?

Spasticity can happen after the brain or the nerves in your spine are damaged. Your muscles can tighten when you do not need them to and become stiff. This is spasticity. This can cause problems using your hand and arm in daily tasks, as well as caring for your hand and arm. As a result, you may experience pain, discomfort and skin breakdown.

What are the available treatments for Spasticity?

Spasticity can be managed by exercise, stretching and splinting. Medication and Botulinum Toxin injections can help to relax tight muscles and reduce the impact of spasticity on everyday life. Some patients may benefit from other procedures such as surgery to help manage their spasticity.

What to expect in the Upper Limb Spasticity Clinic

You will be seen by a specialist physiotherapist and an upper limb surgeon who will discuss your problems with you, examine your hand and arm and consider the best treatment approach to support you to achieve your goals. We will evaluate how any current or past interventions have helped you and consider if an operation might help your arm and hand.

Every patient is different, we will discuss with you the possible interventions that may help to address your individual problems.

How can surgery help Upper Limb Spasticity?

Surgery can help in two ways:

- Some operations can make it easier to care for your hand and arm e.g. being able to open the fingers to clean the palm or to apply a splint.
- Some operations help to improve the movement in your hand and arm to allow you to be more successful in daily tasks. This surgery requires a certain level of movement to be present in the arm to be successful.

What are the different types of operations available?

The range of operations that can be performed is complex and depends on the individual needs and goals of the patient. The most common surgical options available are summarised here.

Tendon lengthening: This surgery involves an incision into the muscle and tendon to increase the length of the tight muscle and allow the joint to rest in a more open posture. This can be helpful for fingers that claw into the palm of the hand or elbows that bend excessively.

Tendon transfer: This involves surgically transferring a healthy muscle to work in a different way to compensate for muscles that are weak and tight. This is most commonly used at the wrist.

Thumb stabilisation surgery: This surgery involves releasing the tight muscles at the base of the thumb and using some surgical wire or plates to stiffen the joint at the base of the thumb to allow for a more open thumb position. A tendon transfer can also be carried out to improve the movement of the thumb.

Neurectomy: This surgery involves the removal of a small part of the nerve that causes the spasticity or tightness in the muscles. It will not lengthen the muscle but will help the muscle to be more relaxed at rest.

What are the potential risks of surgery?

Surgery is usually carried out under general anaesthetic. As with all operations, there are risks to be considered such as bleeding, infection at the wound site and problems with healing. There is also the possibility that the surgery does not improve your function as expected. These risks will be discussed with you in the clinic with the surgeon.

What happens after the surgery?

You will most likely need to wear a non-removable cast for 6 weeks following any surgery. It is likely that you will need to wear a removable splint for a further 6 weeks. You will then be seen by the Hand Therapy team and will need to carry out a programme of exercises and stretches to mobilise the hand and arm. It can take up to 12 weeks to return to normal use of the hand and arm. We will review you in the Upper Limb Spasticity clinic after approximately 3 to 6 months following the surgery.

Will any further Investigations be required before surgery?

To help determine the best surgery for you, we may need to do a nerve block injection. This injection temporarily reduces the transmission in the nerve that causes your spasticity. This injection can be done in a spasticity clinic appointment.

Some patients are referred to the Oxford Gait Laboratory for video movement analysis of their arm movements to help inform surgical options. Once the report from this assessment is available, we will review you in clinic to agree the best surgical plan.

We may also refer you for further botulinum toxin injections, splinting or therapy to help ensure you remain in the best condition while awaiting surgery.

A pre-operative assessment will be carried out with the anaesthetic team to identify if you have any health issues that will impact on your ability to proceed with surgery.

Where will the surgery take place?

You will be admitted to the Nuffield Orthopaedic Centre on the morning of the operation and may need to stay in hospital for one night.

Contact details

Please speak with the clinic team if you have any questions.

Our contact details for appointment information and advice during working hours is: **01865 737 451**.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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