

Resource 4

Hand contracture presentation and management by severity

Mild

- Hand may rest in a flexed posture (clenched fist), but passive movement allows most of the finger range. There may only be a contracture in one or two digits, or the hand may present with low/flaccid tone.
- May not involve all fingers, thumb, or wrist.
- Difficulty actively opening fingers or using the hand for functional tasks. Pain may occur during hand hygiene or movement, though generally less severe than in more advanced contractures.
- Orthoses (e.g., a large Medoris splint) may help provide prolonged stretch and maintain extension of the wrist and hand.
- If low tone is present, an orthosis may help support a functional hand position; ongoing monitoring of tone changes is advisable.

Summary:

- Clenched-fist posture with flexed digits but some passive movement, or low-tone presentation with fingers/thumb in extension.
- Functional use and hygiene are limited.
- An orthosis may help maintain range.
- Contracture is present and at risk of worsening without appropriate management.

Moderate

- Passive movement is limited and requires increased force; contractures may involve the fingers, thumb, or wrist.
- Active movement is minimal or absent and is not functional.
- Pain is likely during handling.
- The hand may develop an odour.
- Hygiene is challenging; careful skin-integrity monitoring and an individualised hand-care plan are essential.
- Nail care must be carried out by trained staff.
- Water may be unsuitable if the hand cannot be fully dried, due to risk of moisture damage.
- Use soap substitutes and non-fragranced products.
- Full correction to a functional or optimal position may not be possible with orthoses, but supportive positioning or orthosis use can help reduce progression.
- Risk assessments for skin-breakdown are required. Off-loading supports (e.g., Dermisplus) may be needed.
- An orthosis focusing on the hand alone may be appropriate (e.g., low-profile Medoris palm protector), as supporting both wrist and hand together may not be feasible – prioritise the hand.
- Consider antispasticity review or surgical intervention if indicated.



Summary:

- Significant flexion of fingers, thumb, or wrist with limited passive range that requires increased force to move.
- Active movement is minimal or nonfunctional.
- Pain is common, hygiene is difficult, and there is increased risk of odour, yeast infections, moisture damage, and skin breakdown.
- Full correction is unlikely, but orthoses or supportive positioning help prevent deterioration.
- Off-loading products may be required.
- Individualised care plans and potential medical interventions should be considered.

Severe

- Hand fixed in position with global contractures; passive movement requires very high force or may be almost impossible.
- Hygiene is complex with high risk of skin-integrity breakdown.
- Pressure damage is more likely than in mild/moderate contracture, and full monitoring of all hand areas may not be possible; risk assessments are essential.
- Pain occurs during handling; therapeutic handling and optimised pain relief are necessary.
- An individualised hand-care plan is required to ensure safe handling, hygiene, and pressure management.
- Orthosis use is very limited (e.g., low-profile Medoris palm protector), and pressure-management strategies such as offloading or promoting airflow (e.g., Dermisplus) may be required.



Summary:

- The hand is fixed with global contractures and minimal passive movement.
- Hygiene is highly complex, with significant risk of breakdown and pressure damage.
- Pain is common during any handling.
- A tailored care plan is essential.
- Orthosis options are limited; pressure-relief approaches and offloading strategies are typically required.



Scan me

@ westcarehomesupport@berkshire.nhs.uk

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