

INPLASY

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Open Palm Technique (McCash) versus Limited Fasciectomy in Dupuytren's Disease: a Systematic Review

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ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - Completed but not published.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202610072

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 21 January 2026 and was last updated on 21 January 2026.

INTRODUCTION

Review question / Objective In patients with Dupuytren's disease, how does the open palm technique (McCash) compare with limited fasciectomy regarding recurrence rates, complications, wound healing, and functional outcomes?

Condition being studied Dupuytren's disease is a fibroproliferative disorder of the palmar fascia that can lead to progressive digital flexion contractures and functional impairment. Surgical treatment remains the mainstay for advanced disease, with limited fasciectomy and the open palm technique (McCash) being widely used procedures. However, there is ongoing debate regarding the optimal surgical approach, particularly concerning recurrence, complication rates, wound healing, and functional recovery.

METHODS

Search strategy A systematic literature search will be conducted in the following electronic databases:

PubMed/MEDLINE

Embase

Scopus

The search strategy will combine controlled vocabulary and free-text terms related to Dupuytren's disease and surgical techniques, including:

“Dupuytren disease”, “Dupuytren contracture”, “open palm technique”, “McCash”, and “limited fasciectomy”.

The reference lists of included studies will also be manually screened to identify additional relevant articles.

Participant or population Adult patients diagnosed with Dupuytren's disease undergoing surgical treatment.

Intervention Open palm technique (McCash technique).

Comparator Limited fasciectomy.

Study designs to be included Randomized controlled trialsProspective or retrospective comparative studiesObservational cohort studiesCase reports, narrative reviews, editorials, letters, technical notes without comparative data, animal studies, and cadaveric studies will be excluded.

Eligibility criteria

Inclusion criteria:

Studies comparing the open palm technique (McCash) with limited fasciectomy

Studies involving adult patients with Dupuytren's disease

Studies reporting at least one predefined outcome of interest

Full-text articles available

Articles published in English

Exclusion criteria:

Non-comparative studies

Studies evaluating non-surgical treatments only

Studies involving revision surgery exclusively

Conference abstracts without full-text publication.

Information sources The following electronic databases will be systematically searched: PubMed/MEDLINE, Embase, and Scopus. In addition, the reference lists of all included studies will be manually screened to identify potentially relevant articles not retrieved through the database search.

Main outcome(s)

Primary outcomes:

Recurrence rate

Surgical complications (including skin necrosis, infection, delayed wound healing, and complex regional pain syndrome).

Additional outcome(s)

Secondary outcomes:

Time to wound healing

Functional outcomes (range of motion, patient-reported outcome measures when available)

Time to return to daily activities or work.

Data management All retrieved references will be managed using reference management software, and duplicate records will be identified and removed prior to the screening process.

Quality assessment / Risk of bias analysis The methodological quality of the included studies will be assessed according to study design. Randomized controlled trials will be evaluated using the Cochrane Risk of Bias tool, while non-randomized comparative studies will be assessed using the Newcastle–Ottawa Scale.

Strategy of data synthesis A qualitative narrative synthesis of the findings will be performed. Due to expected clinical and methodological heterogeneity among the included studies, no meta-analysis is planned.

Subgroup analysis No subgroup analysis is planned.

Sensitivity analysis No sensitivity analysis is planned.

Language restriction Only studies published in English will be included.no.

Country(ies) involved Brazil.

Keywords Dupuytren disease; Dupuytren contracture; open palm technique; McCash; limited fasciectomy; hand surgery..

Contributions of each author

Author 1 - RODRIGO BARROS - Author 1 contributed to the conception and design of the study, development of the protocol, literature search strategy, data selection, data extraction, data synthesis, and drafting of the manuscript.

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