## Polydactyly of Fingers

## What is polydactyly?

Polydactyly is a term used to describe an extra finger or fingers. It is a fairly common condition and often runs in families. The extra fingers are usually smaller and abnormally developed

The extra fingers can be:
On the small finger side - most common (ulnar)
On the thumb side, also called thumb duplication - less common (radial)

In the middle of the hand - least common (central)
African-American children are more likely to have an extra little finger, while Asians and Caucasians are more likely to have an extra thumb. Usually, only 1 hand is affected.

## What causes polydactyly?

During normal embryonic development, the hand forms in the shape of a paddle, and then splits into separate fingers.

Polydactyly happens when this process continues a bit longer than normal, so that a single finger splits in 2 to create an extra digit.

Many cases seem to occur without a clear cause, while some may occur due to a genetic (inherited) condition. Polydactyly may also occur as a part of a medical syndrome.

## How is polydactyly diagnosed?

Polydactyly can be seen by a prenatal ultrasound, but it is most often diagnosed when the baby is born. Your baby may have X-rays to see the underlying structure of their finger and decide on treatment.

## How is polydactyly treated?

If the extra finger is on the small finger side and is connected to the rest of the hand by only a small skin bridge, the digit may be able to be clipped or tied in the office. The extra digit is clipped or tied right where it joins the hand, and it will then shrivel and fall off over a period of about 2 weeks, similar to when the umbilical cord is clipped at birth.

If the extra finger is more fully developed, your child may benefit from a surgery to remove the extra finger. This is typically done when a child is between 1-2 years old. This surgery can range from a simpler procedure to remove the extra little finger to more complex procedures (for thumbs and central fingers). Sometimes more than one surgery is needed.

After surgery, your child may wear a bulky bandage or cast for a few weeks and have physical/occupational therapy to help with scarring, stiffness and swelling.

Your child may have follow-up visits to check on how their hand is healing and moving.

## In-office Clipping



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## Notes

