Summer 2016

The Effectiveness of Compression Gloves for Reducing Hand Edema

Colleen Pastunink  
Western Michigan University

Ryan Steele  
Western Michigan University

Follow this and additional works at: http://scholarworks.wmich.edu/ot_posters

Part of the Occupational Therapy Commons

WMU ScholarWorks Citation  
Pastunink, Colleen and Steele, Ryan, "The Effectiveness of Compression Gloves for Reducing Hand Edema" (2016). Occupational Therapy Graduate Student Evidenced-Based Research Reviews. 7.  
http://scholarworks.wmich.edu/ot_posters/7

This Article is brought to you for free and open access by the Occupational Therapy at ScholarWorks at WMU. It has been accepted for inclusion in Occupational Therapy Graduate Student Evidenced-Based Research Reviews by an authorized administrator of ScholarWorks at WMU. For more information, please contact maira.bundza@wmich.edu.
The Effectiveness of Compression Gloves for Reducing Hand Edema

Colleen Pastunink, OTS & Ryan Steele, OTS

Case
Sally is a 72-year-old Caucasian female. She is 8 weeks post left Cerebral Vascular Accident (CVA) which resulted in left hemiparesis and expressive aphasia. She has now been discharged to home and is to attend outpatient therapy twice per week for 12 weeks. Prior to her stroke, Sally was independent in all self-care activities and was very socially active in her community. During an initial occupational therapy evaluation, therapists report that Sally is independent in all transfers and ambulates with the use of a quad cane. Circumferential measurements were taken during evaluation of the right upper extremity secondary to the observation of significant edema. Therapists hope through the use of compression gloves, hand edema will be reduced, therefore, improving functional use of the right upper extremity.

1 Ask: Research Question
Is using a compression glove an effective treatment for hand edema?

2a Acquire: Search Terms
Patient/Client group: Patients with Hand Edema Intervention: Compression Gloves Comparison: Compression Glove, Compression Bandages, Placebo Glove Outcome: Reduction in Edema

2b Acquire: Selected Articles
Hammond et al. (2016): A systematic review of the effects of compression gloves on hand symptoms and function in rheumatoid arthritis (RA) and hand osteoarthritis (HOA).
Gustaffson et al. (2016): A single-N (ABC) design that studied the efficacy of compression gloves (C) in maintaining edema reductions post stroke (CVA) after first compression bandaging (B).
Harris et al. (2011): A randomized controlled trial (RCT) that examined the effects of compression gloves at reducing the complications secondary to distal radius fractures (DRF).

3a Appraise: Study Quality
Hammond et al. (2016): Level I Evidence. Small sample size consistent across each of the four studies, ranging from (N=8-24; total N=74). Most of the studies carried a high risk of Type I or II errors. Findings may not be relevant to modern practice due to lack of recent research and ever-changing treatment protocols and production of compression gloves.
Gustaffson et al. (2016): Level III Evidence. Single-N design. Due to the nature of this design and lack of internal validity, it does not allow for strong conclusions to be drawn.

3b Appraise: Study Results
Depending on the diagnosis, compression gloves may improve, maintain, or fail to maintain improvements in edema of the hands. Harris et al. (2011) found that client’s using compression gloves, in conjunction with standard post-operative dressings after DRF surgical repair, experienced significantly less edema throughout the immobilization period.

4 Apply: Conclusions for Practice
Overall, mixed research findings offer marginally promising results along with implications for future research. Findings are hampered by lack of recent research, minimal variance in glove material and manufacturers, changes in treatment protocol and generally small sample sizes. Although studies showed a reduction in PIP joint circumference after the right edge of compression gloves for RA, it was not paired with reductions in finger stiffness or improvements in flexion and dexterity, suggesting that this research may not be clinically significant. Ill-fitting, off-the-shelf gloves may be the reasoning behind conflicting results; custom gloves that extend above the wrist to the forearm allow for better outcomes for reducing and maintaining hand edema. Significant reductions in edema and complications following DRF and lowered incidence of Carpal Tunnel Syndrome and Complex Regional Pain syndrome, suggest that compression gloves may be more beneficial for certain diagnoses and more research should be conducted.

References:

Conflicting research shows that the effectiveness of compression gloves for the treatment of hand edema remains unclear.