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Notes: Includes bibliographical references (p. 397-409) and indexes.
This edition was published in 1995

Filesize: 32.67 MB

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Hŏnpŏp chaep'an chŏlch'a ŭi kaesŏn ŭl wihan ippŏmnonjŏk yŏn'gu. (1993 edition)

The condition can range from having no problems to having major difficulties in ambulation in early adult life, however, the latter is unusual. Agonist muscles ie, prime movers and antagonist muscles ie, stabilizers are graded for strength through the range of joint mobility.

Genetic Testing

Of interest to the orthopaedic surgeon is hereditary neuropathy with a liability to pressure palsies HNPP 371. The dropped wrist is treated by a splint and the dropped foot by an ankle-foot orthosis with a rigid ankle in neutral position.

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Both CMT Types I and II are characterized by a slow degeneration of peripheral nerves and roots, resulting in distal muscle atrophy commencing in the lower extremities, and affecting the upper extremities several years later.

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If foot drop is severe and the disease has become stationary, the ankle can be stabilized by arthrodeses. Early recognition and treatment phlebotomy is essential to prevent irreversible complications such as cirrhosis and hepatocellular carcinoma. The orthopaedic dilemmas include poor tolerance from respiratory compromise in a thoracolumbosacral orthosis or spinal fusion with subsequent inhibition of spinal growth in a young child, resulting in a short trunk.

MUSCLE AND NERVE DISORDERS IN CHILDREN

Although individual muscle testing is time consuming, tedious, and almost impossible in young, uncooperative children, it is essential as a baseline study for patients with suspected muscle or nerve disease. Recurrent microtrauma causes synovial inflammation, hemarthrosis, periosteal elevation with subsequent cortical bone thickening, physeal widening, osteonecrosis, and osteochondritis dissecans.

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