

Microsurgical reconstruction of the extremities - indications, technique, and postoperative care

Springer-Verlag - Microsurgical Reconstruction of the Extremities: Indications, Technique, and Postoperative Care / Edition 1 by Leonard Gordon, James Brodale, Susan Taft

Description: -

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Yachts and yachting.

Istanbul (Turkey) -- Social life and customs.

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Replantation.

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Extremities (Anatomy) -- Transplantation.

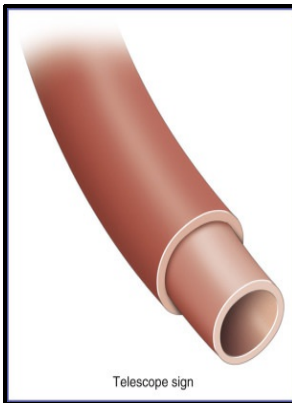
Microsurgery.

Extremities (Anatomy) -- Surgery. Microsurgical reconstruction of the extremities - indications, technique, and postoperative care

-Microsurgical reconstruction of the extremities - indications, technique, and postoperative care

Notes: Includes bibliographies and index.

This edition was published in 1988



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Supermicrosurgery in Lower Extremity Reconstruction

The older group included 23 men 48% and 25 women 52% with a mean age at surgery of 75. After determining the perforator feasible to use as a recipient vessel, the required pedicle length of the flap is measured. Moreover, improvements in microsurgical equipment, magnification systems, and operative experience have led to a shift toward increasing the use of free flaps in older patients.

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Full flap necrosis occurred in 9 cases; partial necrosis was observed at the wound edges of 2 flaps, and a donor-site hematoma needed to be evacuated in 1 case. This study failed to detect significant differences in outcomes according to flap type, donor location, or flap vessel diameter, supporting our belief that fasciocutaneous flaps are superior to muscle flaps for older patients.

Microsurgical Reconstruction of the Lower Extremity in the Elderly

Besides, most defects were located in the distal lower leg and accompanied by exposure of bone or hardware. Furthermore, these secondary procedures can be performed under tumescent anesthesia, which is a substantial benefit for older patients with multiple co-morbidities.

Early Ambulation After Microsurgical Reconstruction of the Lower Extremity

A control group was created using younger patients 18—65 years old who had undergone similar treatments that were performed by the same surgical team at the same center during the same time period. Continuous variables were reported as mean \pm standard deviation, and categorical variables were reported as number percentage. Case demonstrations up to 4 cases Discussion Microsurgery has revolutionized lower extremity reconstruction as in concepts of orthoplastic surgery and is increasingly required in elderly patients, a subpopulation that is continuously growing in Europe and the United States.

Microsurgical Reconstruction of the Extremities

Similarly, supercharging via a superficial vein is used in cases with substantial diameter mismatch.

Supermicrosurgery in Lower Extremity Reconstruction

In cases of large axial vessels anatomically located deep to the muscles, injured or calcified, patients benefit the most from using a perforator as a recipient. Conclusion This study revealed that older and younger patients had comparable flap-related outcomes after microsurgical free flap reconstruction of soft tissue defects in their extremities.

Microsurgical Reconstruction of the Extremities

Thus, utilizing the recipient from the contralateral leg spared from injury in a cross-leg fashion can be a reliable source. These situations frequently result in limited availability of good pulsatile axial arteries as choices for recipient vessels. This finding emphasizes that compared with the chronologic age, biological age is considered more relevant today, taking into account evaluation measures, such as the ASA classification.

Supermicrosurgery in Lower Extremity Reconstruction

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