

Brachial Plexus OBSTETRICAL BRACHIAL PLEXUS PALSY : HAND'S LATE SURGERY RESULTS .

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Introduction

Nerve reconstruction is indicated in case of total palsy; the goal of this surgery is to have sensitive and functional hand. In literature this result is obtained in 60 %. But what about patient which didn't have nerve surgery? Through this study we present the result of hand secondary procedures.

Material and method:

Retrospective study concerning over than 30 children presenting total plexus palsy; operated in our department. Result: Average age was four. Preoperative assessment showed that: - All patient had shoulder abduction less than 90°, 50% of cases had none or incomplete elbow extension and global Mallet score varied between 1 to 3,4 . - In 70 % of cases the hand was classified 3 according to GILBERT and RAIMONDIE score. The most common problem was thumb abduction paralysis and weak flexion . - In 80 % surgery was performed in order to reanimate wrist extension.

Discussion :

wrist extension transfer and radial osteotomy is the most common surgery ; frequently associated to shoulder surgery Late surgery increase hand function on all most cases .but this results depend of initial mobility of thumb , fingers , and pinch thumb index finger force . Unfortunately in 30% cases it is not sufficient to obtain functional hand.

Conclusion :

Late surgery increase hand's function but not sufficient to obtain functional hand when this one is scale I or II.