

Medical report

Patient Julia Shmul with severe tetraplegia at C6 level and who underwent surgery at our center to perform early elongation of the short and long carpus extensor and transposition of the long extensor to the superficial flexor of the fingers with dorsal arthrolysis of both wrists. correction of deviation in severity extension

In a second time, an arthrolysis was performed at the level of the proximal radioulnar joint of the right elbow, which showed a pronation block at 0 degrees and with which a pro-supination balance of 80 -0- 80 was achieved.

Finally, the correction of the attitude presented by the patient in inveterate supination was made, performing a re-routing of the distal portion of the biceps at the level of the proximal radius to obtain active pronation of the hand.

The patient will immediately initiate rehabilitation program to maintain the pronosupination of both elbows, maintaining joint balance of limited extension for 4 weeks to protect the suture both at the wrist and elbow level and it would be advisable from the eighth week of the surgery performed currently undergoing correction surgery to obtain extension of elbows by transposition of posterior deltoids with allograft tibial posterior tendon triceps

This surgery could be done at the end of January and later would require a time of immobilization also of three or four weeks to initiate rehabilitation of extension reeducation

Given the poor condition of both hands, it is very difficult to specify the type of surgery that could potentially and hypothetically be performed at the level of the hands in order to improve the function of them and we can only specify it after assessing the results of the first two surgeries that are proposed to perform

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