

"THE LONG ROAD TO RECONSTRUCT A CHRONIC TENDON INJURY-A SURGEON'S DILLEMA."

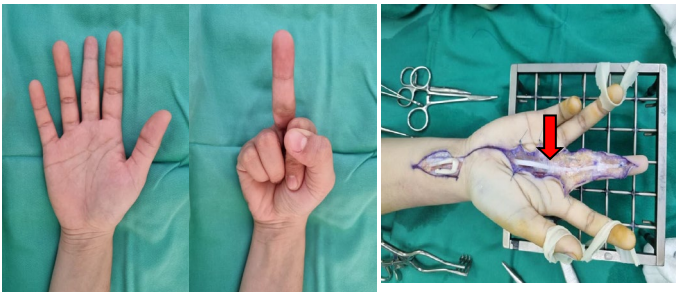
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INTRODUCTION

In Denmark, a statistic of hand injuries was carried by Angermann was published in 2012 showed tendon injury are the second (29%) after fractures (42%). Tendons are collagenous fibres that are arranged into bundles that connect muscle to bone. They are responsible for movement of a joint. Therefore as hands movement are vital execution organ of a human, preservation of tendons are important. We report a challenge in rejuvenating a chronic flexor tendon injury following after 9 years of trauma of a 23 years old lady.

REPORT:

A 23 years old lady with right hand dominant came with complained of inability to flex her right middle finger following injury 9 years back. She did not seek treatment until she came to us in July 2020. In resting posture there were loss of digital cascade of the right middle finger and loss of active flexion of her right middle finger (*picture 1*). She undergone 2-stages surgery which 14 weeks apart in between the surgery. In the 1st stage, silicone was inserted and subsequently reconstruction was done in the 2nd operation. Postoperatively was started with passive range of motion exercise.



Picture 2

Arrow showing silicone rod

DISCUSSION:

Chronic flexor injury is challenging condition which required 2-stages surgery and steadfast rehabilitation. In this case the 1st surgery was to insert silicone rod followed with tendon grafting and reconstruction in the 2nd surgery. Second stage surgery was proceed as the pulleys were intact and present of fibrous tissue in the tunnel. Post operatively, tenodesis was able to be restored (*picture 2*).



Picture 2

CONCLUSION:

To conclude, secondary repair (> 3 weeks from primary trauma) of tendon is challenging. However with an appropriate surgery planning it is possible in restoring the flexor tendon.

REFERENCES:

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- 2)Articles of chronic flexor tendon lesion by Samuel ribak
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