TENDON TRANSFER IN PALSIED HAND DEFORMITIES

Essay
Submitted for Partial Fulfillment of
Master Degree in
ORTHOPAEDICS

By

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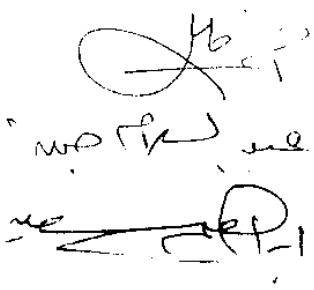

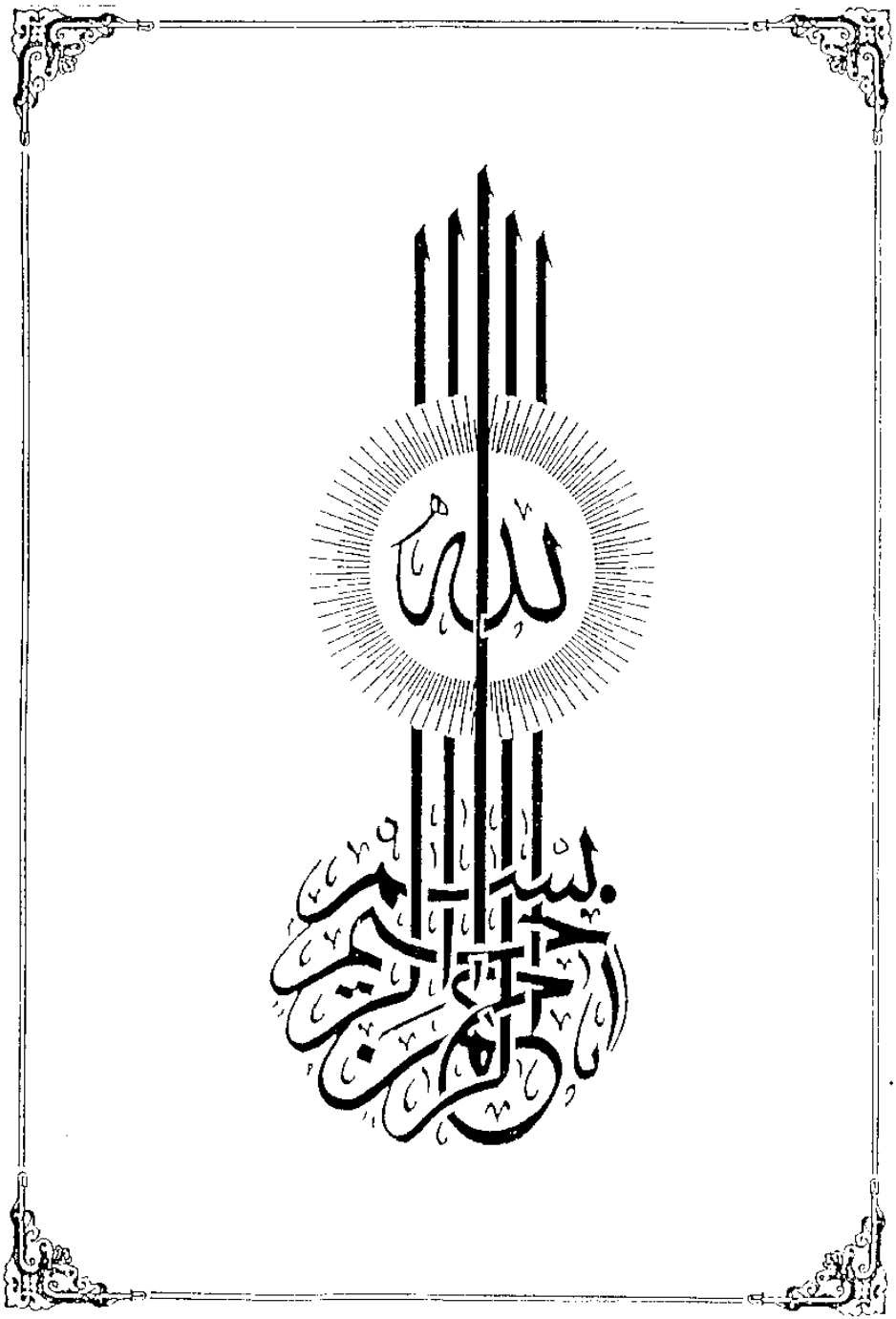

Acknowledgment

First of all, thanks to God.

I wish to express my deepest gratitude and thanks to Professor **Dr. Ibrahim Saied Darwish,** *Professor of Orthopaedics, Ain-Shams University, for giving me the privilege of being under his supervision and valuable suggestions to perform this essay.*

His constant encouragement and constructive guidance were of paramount importance for the initiation and progress of this work.

I would like to extend my sincere thanks to Professor Dr. **Sherif Fathi Abd El-Hamid,** *Assistant professor of Orthopaedics, Ain-Shams University, for his meticulous remarkable effort, considerable help, which were major factors behind the completion of this essay.*

Last but, not least, my deepest appreciation to **Dr. Tarek Mohamed Khalil** *for his kind help, valuable observations and generous support.*

Mohamed Nabil

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List of Abbreviations

❖ Scientific abbreviations:

AbDQ	*Abductor Digiti Quinti.*
AbPB	*Abductor Pollicis Brevis.*
AbPL	*Abductor Pollicis Longus.*
AdP	*Adductor pollicis.*
AHC	*Anterior Horn Cell.*
BR	*BrachioRadiallis.*
CMC	*CarpoMetaCarpal.*
CP	*Cerebral Palsy.*
CPM	*Continuous Passive Motion.*
DIP	*Distal InterPhalangeal.*
ECRB	*Extensor Carpi Radiallis Brevis.*
ECRL	*Extensor Carpi Radiallis Longus.*
EDC	*Extensor Digitorum Communis.*
EDM	*Extensor Digiti Minimi.*
EDQP	*Extensor Digiti Quinti Proprius.*
EIP	*Extensor Indicis Proprius.*
EPB	*Extensor Pollicis Brevis.*
EPL	*Extensor Pollicis Longus.*
FCR	*Flexor Carpi Radiallis.*
FCU	*Flexor Carpi Ulnaris.*
FDP	*Flexor Digitorum Profundus.*
FDS	*Flexor Digitorum Sublimis, Superficialis.*
FPB	*Flexor Pollicis Brevis.*
FPL	*Flexor Pollicis Longus.*
IP	*InterPhalangeal.*
IQ	*Intelligence Quotient.*
MCP	*MetaCarpoPhalangeal.*
MPS	*MucoPolySaccharides.*
ODQ	*Opponens Digiti Quinti.*
OP	*Opponens Pollicis.*
PIP	*Proximal InterPhalangeal.*
PL	*Palmaris Longus.*
pROM	*passive Range Of Motion.*
PT	*Pronator Teres.*
rER	*rough Endoplasmic Reticulum.*
TC	*TriCeps.*

❖ Mathematical abbreviations:

Cm.: centimeter. Mm.: Millimeter. Nm.: Nanometer.
Kgm.: Kilogram.
Kn.: Kilonewton. N.: Newton.

Introduction & Aim of the Work

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The hand's enormous capacity for adaptability has allowed primitive humans to make stone tools and modern humans to pilot complex aircraft ***(Bender and Light, 1996).***

This is owing to the miraculous accuracy of the fingers in clasping and pinching to judge both power and space simultaneously ***(Milford, 1975).***

The concept of providing a more equitable distribution of forces acting upon a disabled limb is the basis of tendon transfers. ***(Hovius, 1993).***

So tendon transfer procedures may prove to be a viable option to restore balance and function of a disabled hand, with the extreme necessity to focus on specific protocol for each palsied hand. ***(Hoard et al., 1995).***

The surgeon who attempts reconstruction of the palsied hand must have a precise knowledge of structural, functional anatomy and current methods of tendon transplantation, as an important line of treatment at this field. ***(Riordan, 1987).***

The aim of this study is to mention the basics of operative and peri-operative tendon handling, using the transference techniques in the palsied hand as a field, as well as how to think systematically to capture the appropriate choice of the transfer, putting in mind the biomechanical disturbances that occurred.

Anatomy of The Tendons