

RECONSTRUÇÃO MICROCIRÚRGICA DE MEMBROS INFERIORES PÓS-TRAUMA. EXPERIÊNCIA DE 18 CASOS COM RETALHOS MICROCIRÚRGICOS MUSCULARES

LOWER LIMB MICROSURGICAL RECONSTRUCTION. EXPERIENCE OF 18 CASES WITH MICROSURGICAL MUSCLE FLAPS

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DESCRITORES

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KEYWORDS

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INTRODUÇÃO

Fraturas expostas com grandes perdas cutâneas e osteomielite crônica de membros inferiores são problemas de difícil resolução para os cirurgiões plásticos, especialmente se localizados no terço inferior da perna ou no pé. Microcirurgia é uma técnica que fornece boa cobertura e aumento do aporte vascular para a região do trauma.

ABSTRACT

Introduction: open fractures and chronic osteomyelites in lower limb are really difficult problems for reconstructive surgeons, especially if it's localized on the lower third of the leg or in the foot. Microsurgery is a technique that can provide good soft tissue covering and increasing of blood flow for the trauma area. Method: we have studied 18 patients that were submitted to microsurgical flaps of latissimus dorsi and gracilis, depending of the size of defect, with open fractures IIIB and 5 cases with chronic osteomyelites. Results: between 18 cases , we had one total necrosis of the flap resulting from venous thrombosis. All of flaps have survived well. Conclusion: we have used microsurgical muscle flaps (latissimus dorsi and gracilis muscle) because they can provide good soft tissue covering, improvement of blood flow and they are easier to harvest if compared with perforator flaps. So, muscle flaps represents good alternatives for lower limb reconstruction.

MÉTODOS

Foi realizado reconstrução microcirúrgica em 18 pacientes com os retalhos musculares de grande dorsal e gracilis dependendo do tamanho do defeito, sendo 13 casos com fraturas expostas III B e 5 casos com osteomielite crônica.

RESULTADOS

Dentre os 18 casos operados, houve 1 caso de perda total do retalho devido a trombose venosa. Todos os outros casos apresentaram boa evolução.

CONCLUSÃO

Retalhos musculares para reconstrução microcirúrgica de membros inferiores representam uma boa alternativa, porque fornecem uma boa cobertura, aumentam o aporte sanguíneo e são de mais fácil execução quando comparados aos retalhos perfurantes.



Figura 01



Figura 02



Figura 03



Figura 07



Figura 04



Figura 08



Figura 05



Figura 06

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