

Abductor Digiti Minimi Flap for Vascularized Coverage to treat CRPS following CTR

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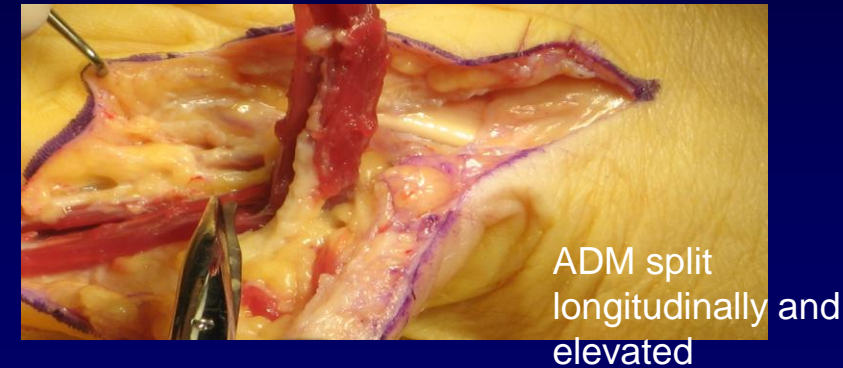
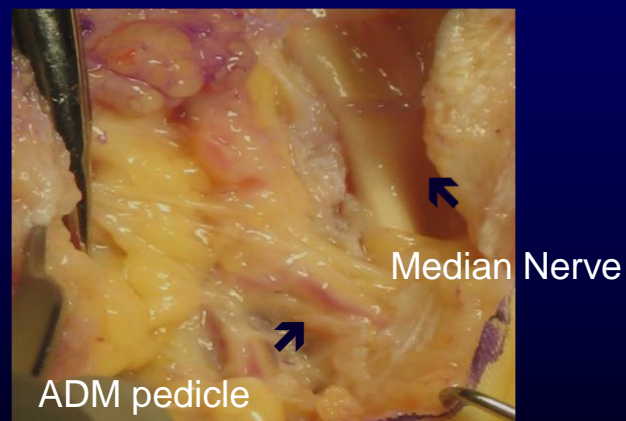
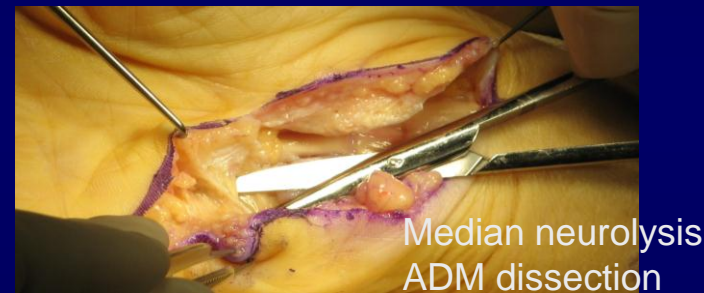
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Objectives:

- CRPS Type II (allodynia) known complication following CTR
- Neurolysis may not be sufficient at relieving symptoms
- The abductor digiti minimi (ADM) flap is a good option to provide adequate soft tissue in cases of recurrent carpal tunnel syndrome

Methods:

- 6 patients (7 cases) with prior carpal tunnel release
- One patient treated with previous neurolysis after carpal tunnel release
- Median age 68 (49-80)



Results:

- Mean follow up 2.75 years
- 2 rated improvement as excellent
- 5 rated improvement as good
- All patients would repeat surgery
- Average Quick DASH score was 29.7 (2.3-65.1)
- Retrospective preoperative CTOI: 47.4 (36-53)
- Postoperative CTOI 27.6 (12-41) ($p < .001$)

Conclusions:

Benefits

- Adequate soft tissue coverage
- Proximity to nerve
- Predictable anatomy

Disadvantages

- Palmar incision
- Donor morbidity