Anatomic Study of the Surgical Approaches to the Radial Tunnel
Ekaterina Y. Urch MD, Zina Model BA, Steve K. Lee MD
Hospital for Special Surgery, New York, NY

RESULTS
Statistical analysis demonstrated that the anterior and anterolateral approaches are best for visualizing the fibrous bands of the radial head, the leash of Henry, the origin of the ECRB and the arcade of Frohse. The posterior approach is best for visualizing the distal border of the supinator. In the table above, “no” indicates the structure was not visualized and “yes” indicates that it was. P-value denotes the difference in visualization between the 3 approaches.

The uncut supinator distance varied with approach. The anterolateral and anterior approaches were found to have larger uncut distances than the posterior approach.

CONCLUSION
No single approach is adequate for complete visualization and release of all compression points of the radial tunnel. In cases of radial tunnel release, complete visualization of the PIN compression sites is best achieved through multiple windows.