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## Surgical decompression in de Quervain Tenosynovitis: A case from Nepal

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De Quervain tenosynovitis is a common cause of functional impairment. Steroid injection has good result but significant numbers of cases develop resistance requiring surgical decompression. This study assesses the outcome of surgery. Symptomatic de Quervain tenosynovitis cases resistant to conservative treatment that underwent surgical decompression and postoperative thumb immobilization using thumb spica splint cast during four and half years were analyzed. They were followed for at least three months for clinical and functional outcome. Patient demography, visual analogue score (VAS) and complications were analyzed descriptively. There were 34 cases of de Quervain tenosynovitis, mean age 42±16 years, and female 88.2%. Treatment was successful in all cases. The mean VAS score reduced to 0.5 from 6.82, p-value <0.01. Complication occurred in one case. Reduction in VAS score was significantly better than other techniques of treatment like SCI or SCI with TSC application. We found septation in 47% and multiple APL

slips in 11.8% of our 34 cases. In contrast, the cadaveric study reports anatomical variation of multiple septation of APL in 57.6% and septation of first dorsal compartment in 47% in 66 cases. This indicates that the failure of treatment with corticosteroid injection may contribute to this anatomical variation and ultrasound guided injection may result in less number of resistant cases. Surgical decompression of de Quervain tenosynovitis was safe and effective in cases resistant to conservative treatment.

### Speaker Biography

Shiva Prasad Parajuli is an Orthopedic surgeon practicing orthopedics and traumatology since 2007 in government and private hospitals of Nepal. He has strong knowledge and skills on managing the trauma patients in emergency for primary management and after for final management like surgeries. He has done many surgeries on trauma and orthopedics such as nailing, plating, hemiarthroplasty, soft tissue injuries, corrective osteotomies. Further, he has been actively involved in research on trauma management and Orthopedics in Nepal.

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