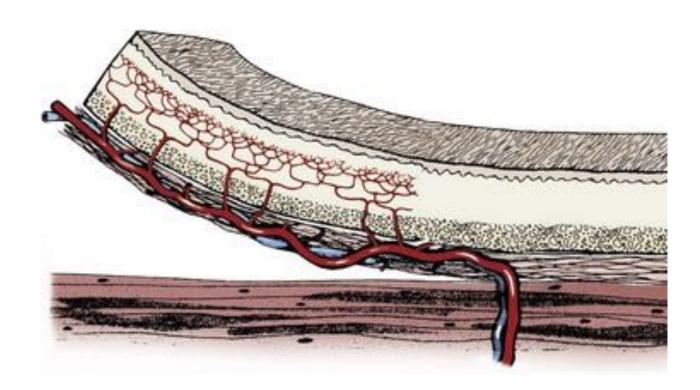
Advanced reconstruction techniques









Dr. Vladislav Zlatinov Central Vet Clinic - Sofia, Bulgaria

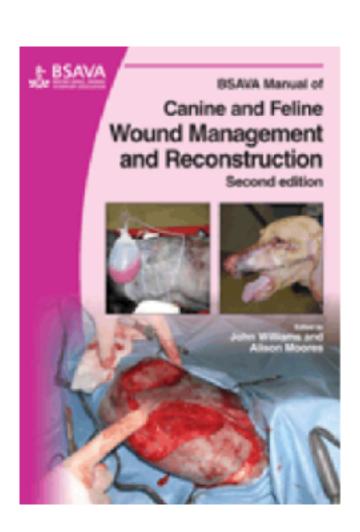
Definition of reconstructive surgery

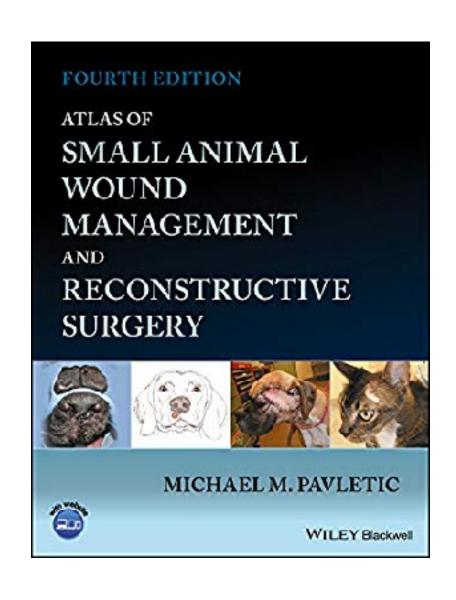
Surgery to <u>restore function or normal appearance</u> by reconstructing defective organs or parts.

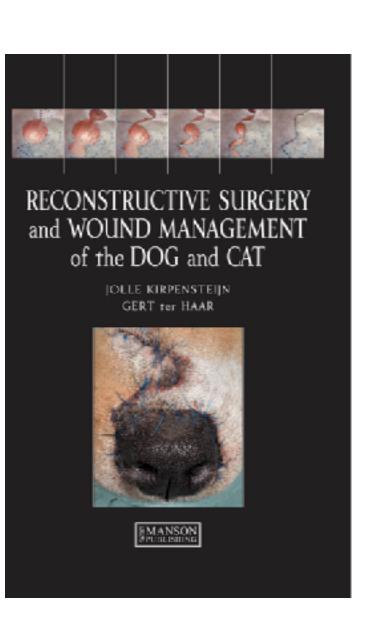


Goal of the presentation

- Extensive topic.
- Common principles and specific cases will be presented.







Numerous textbooks.

Divisions

Oncologic reconstructions



Traumatic reconstructions

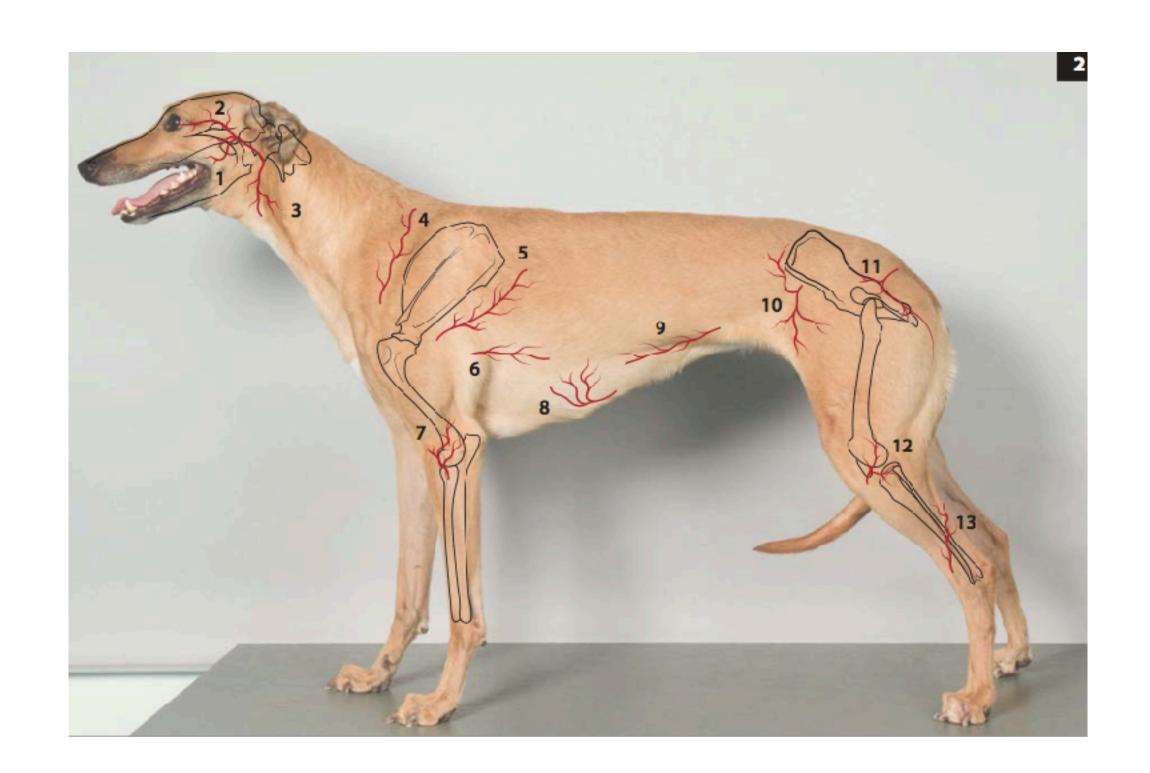


Categories

Skin wounds

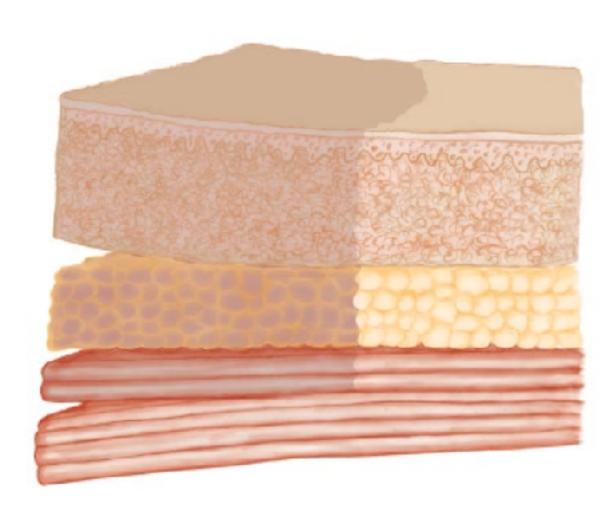
- Body walls
- Maxilo-facial

Limbs



Micro-vascular transplantations

Skin wounds reconstruction



Key points

- Debridement
- Dead space
- Drainage
- Movement
- Blood supply
- Infection
- **Tension**





Wound closure options

Simple closure

Primary (immediate)

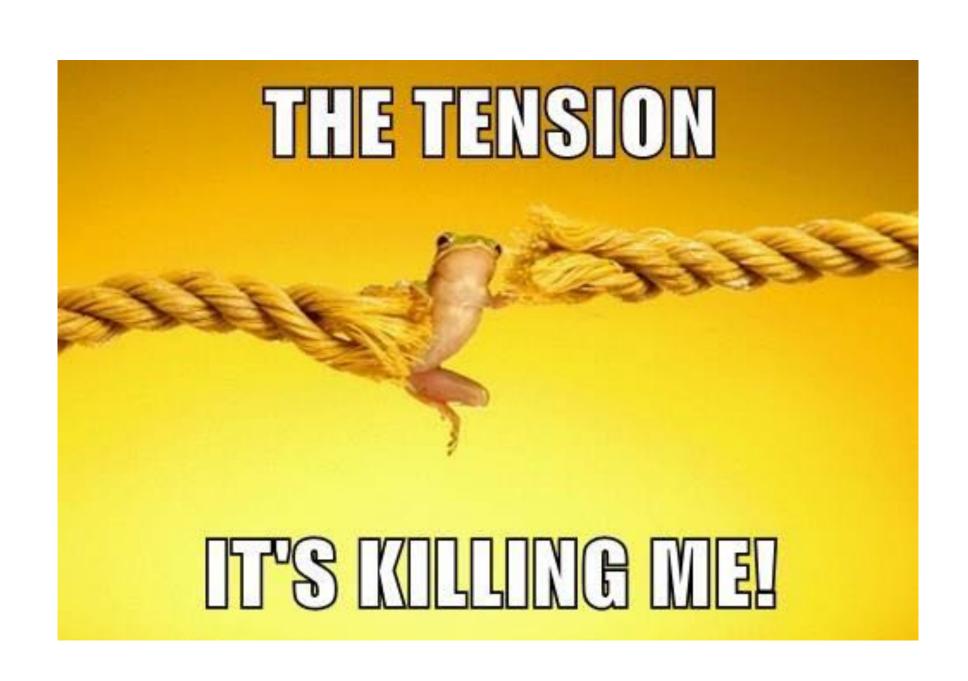


Secondary- <u>after</u> formation of granulation tissue.



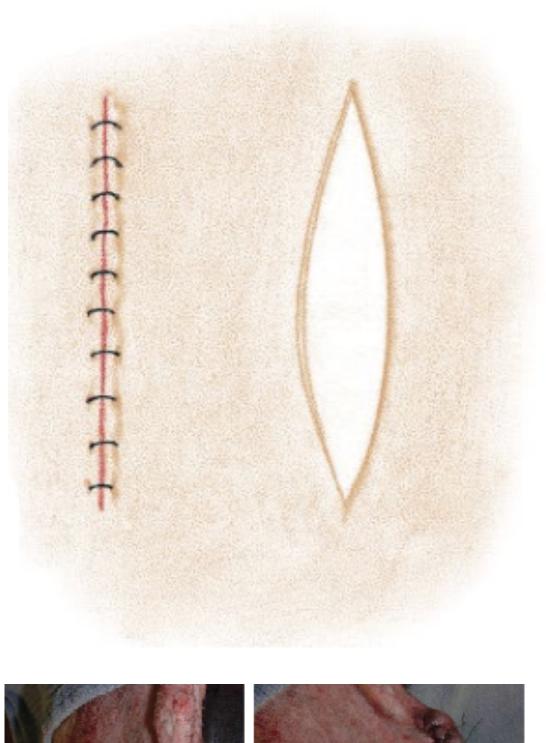


Tension relieving techniques

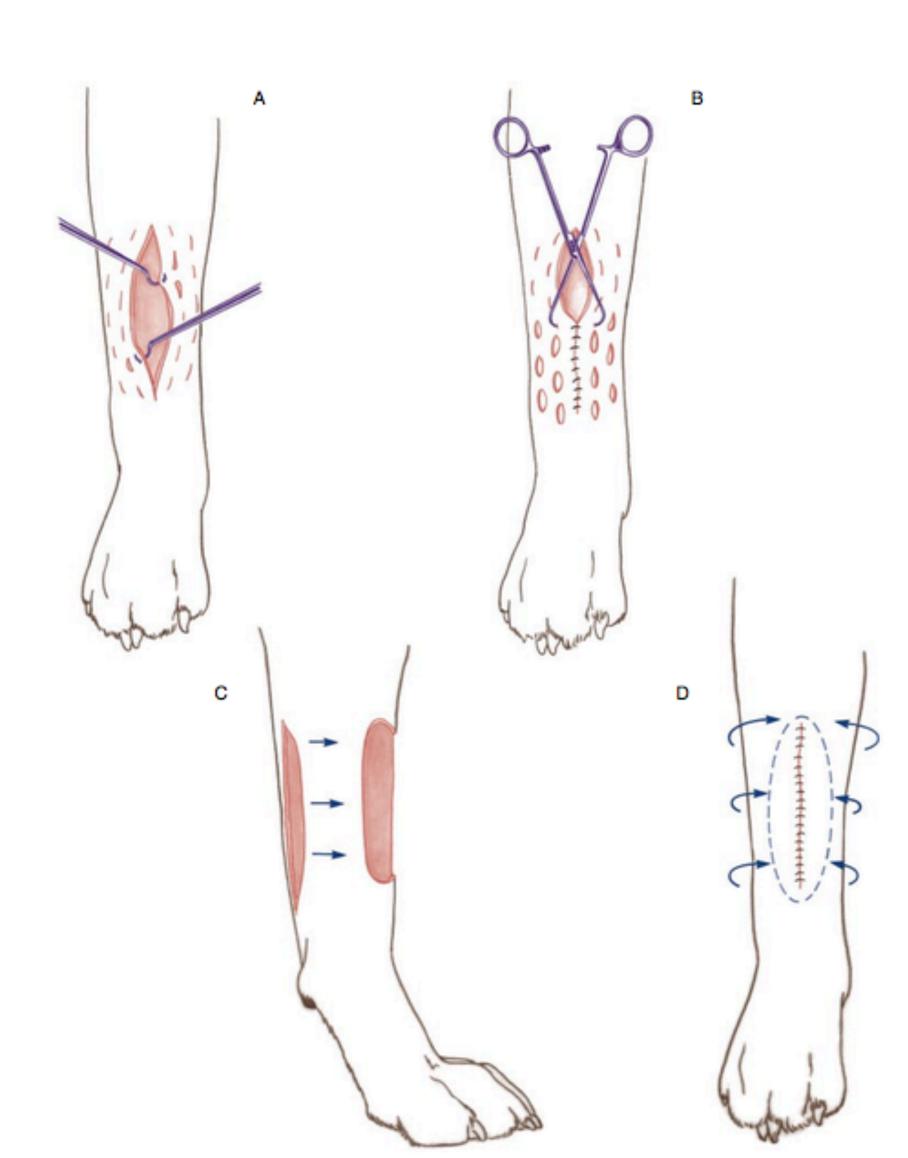


Tension relieving techniques

Releasing incisions

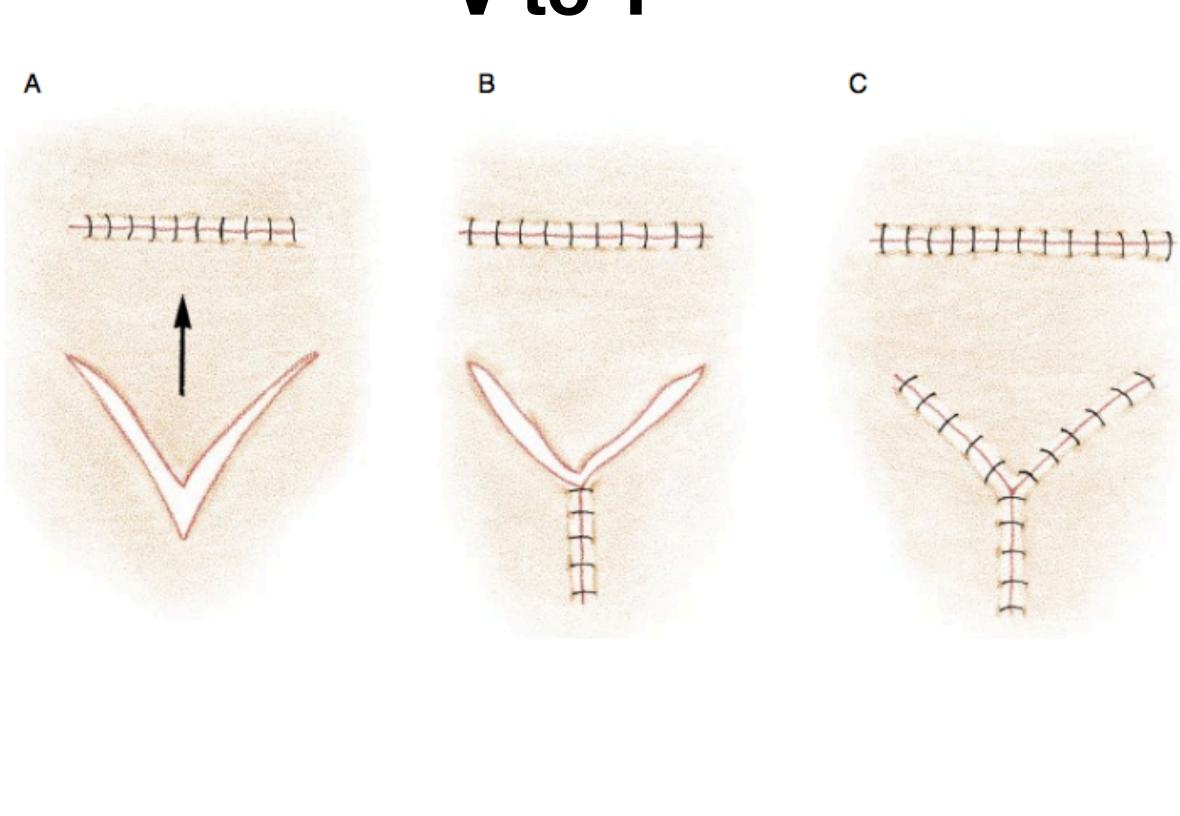




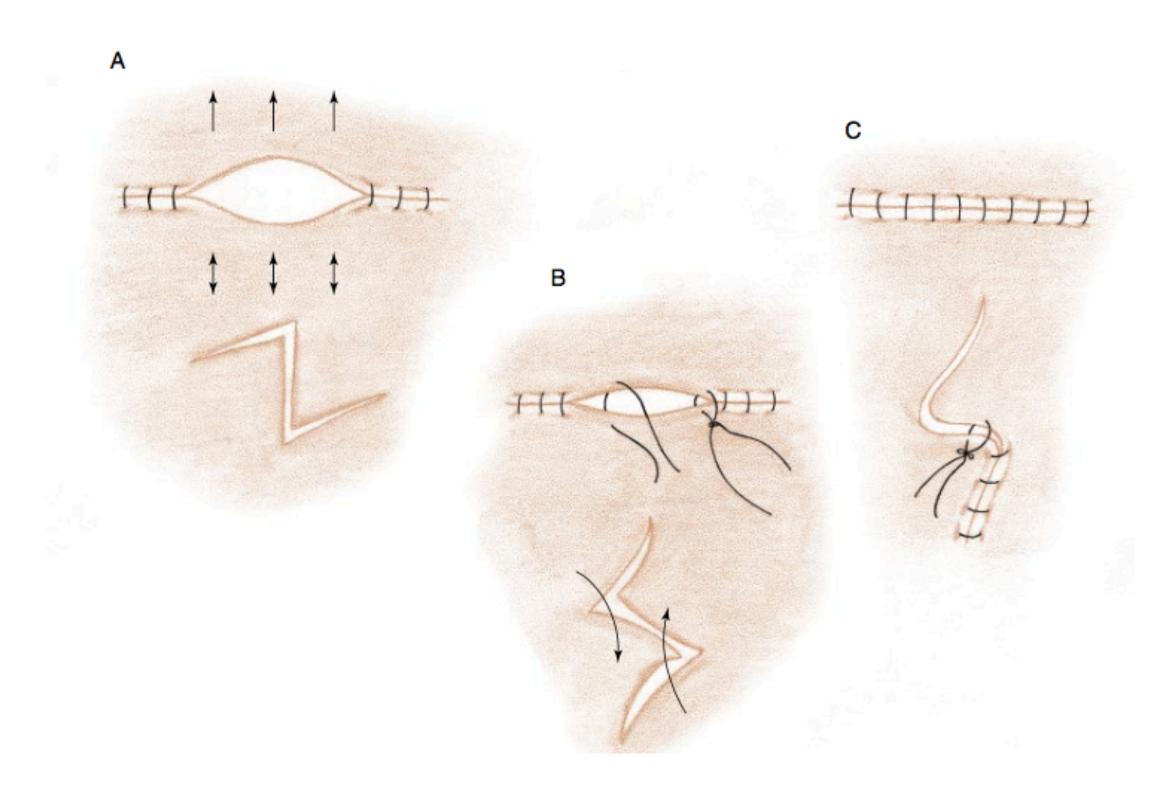


Tension relieving techniques

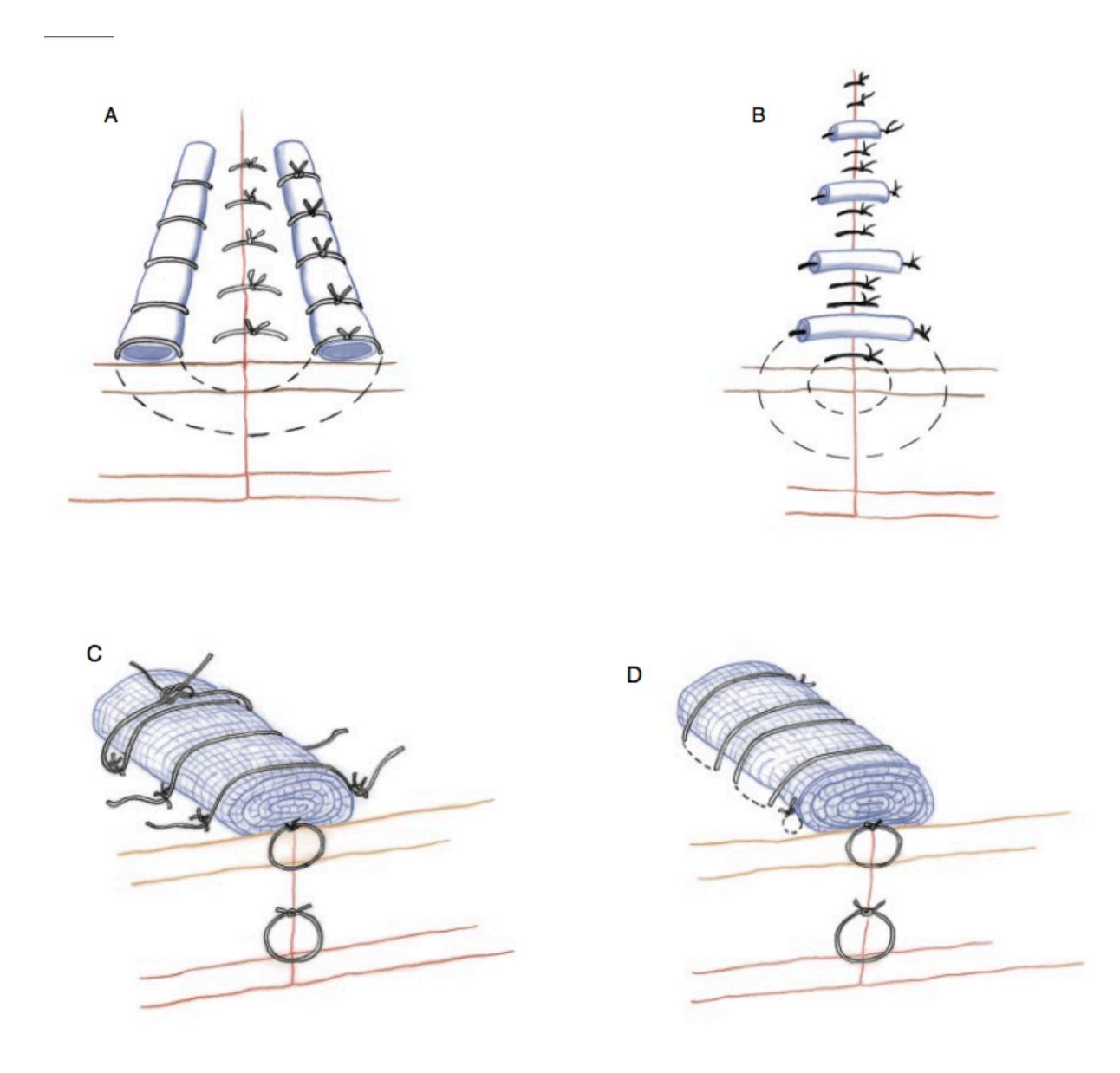
V to Y



Z- plasty

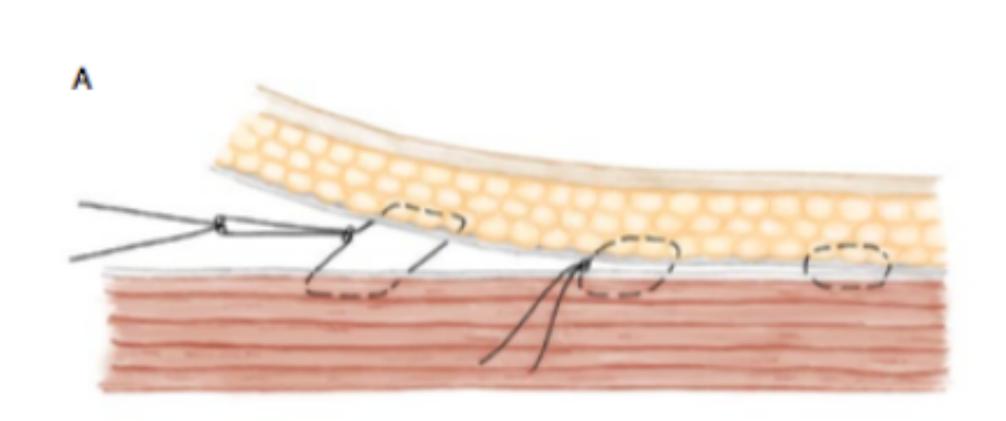


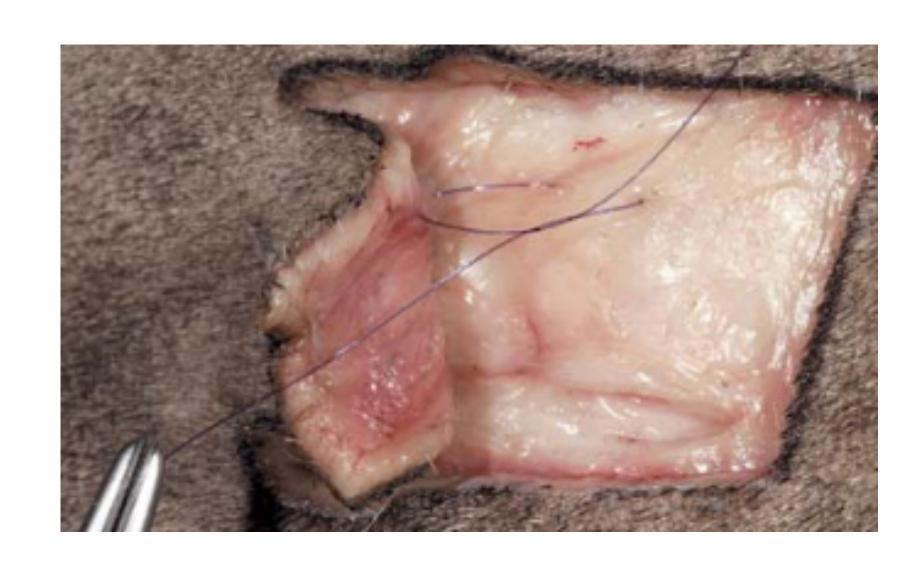
Tension relieving sutures

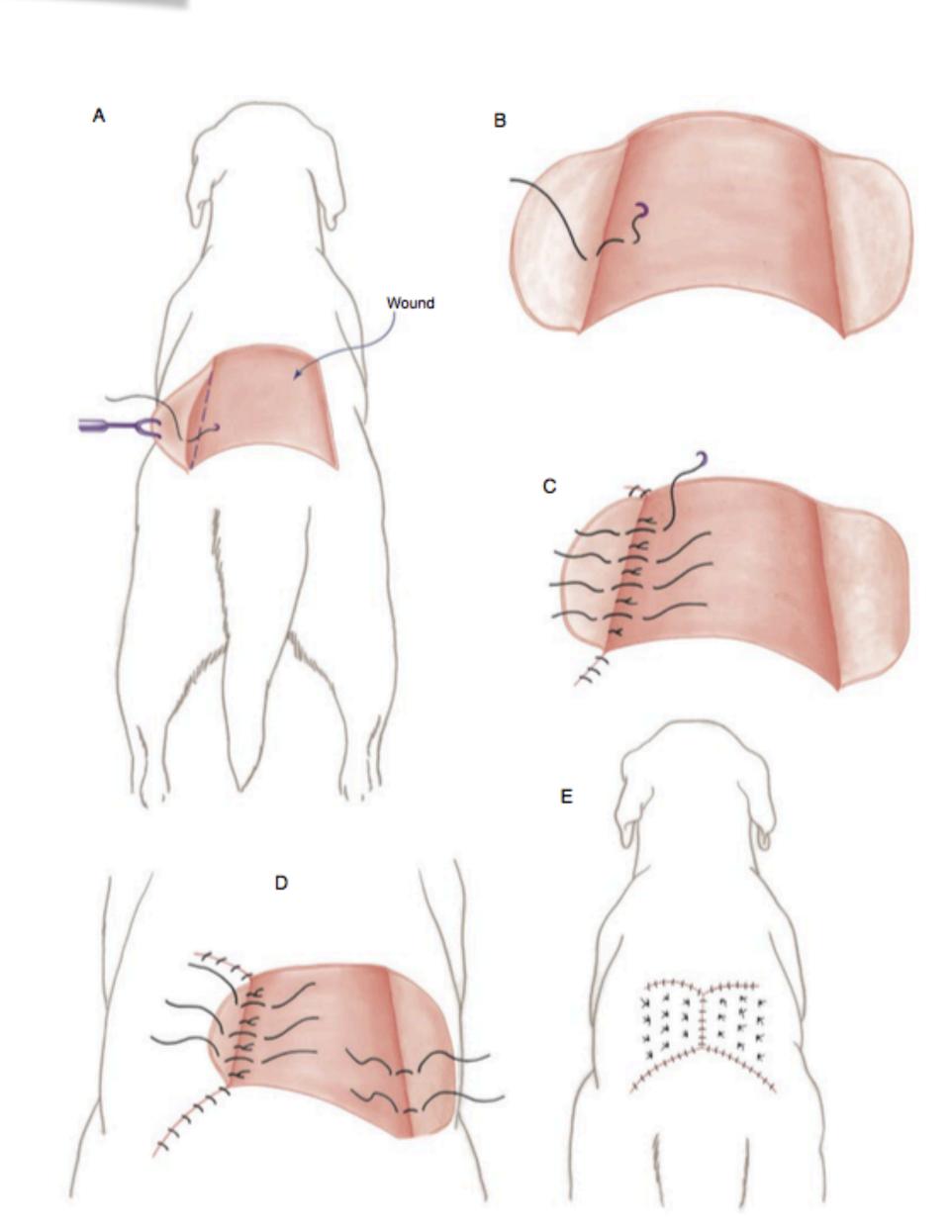




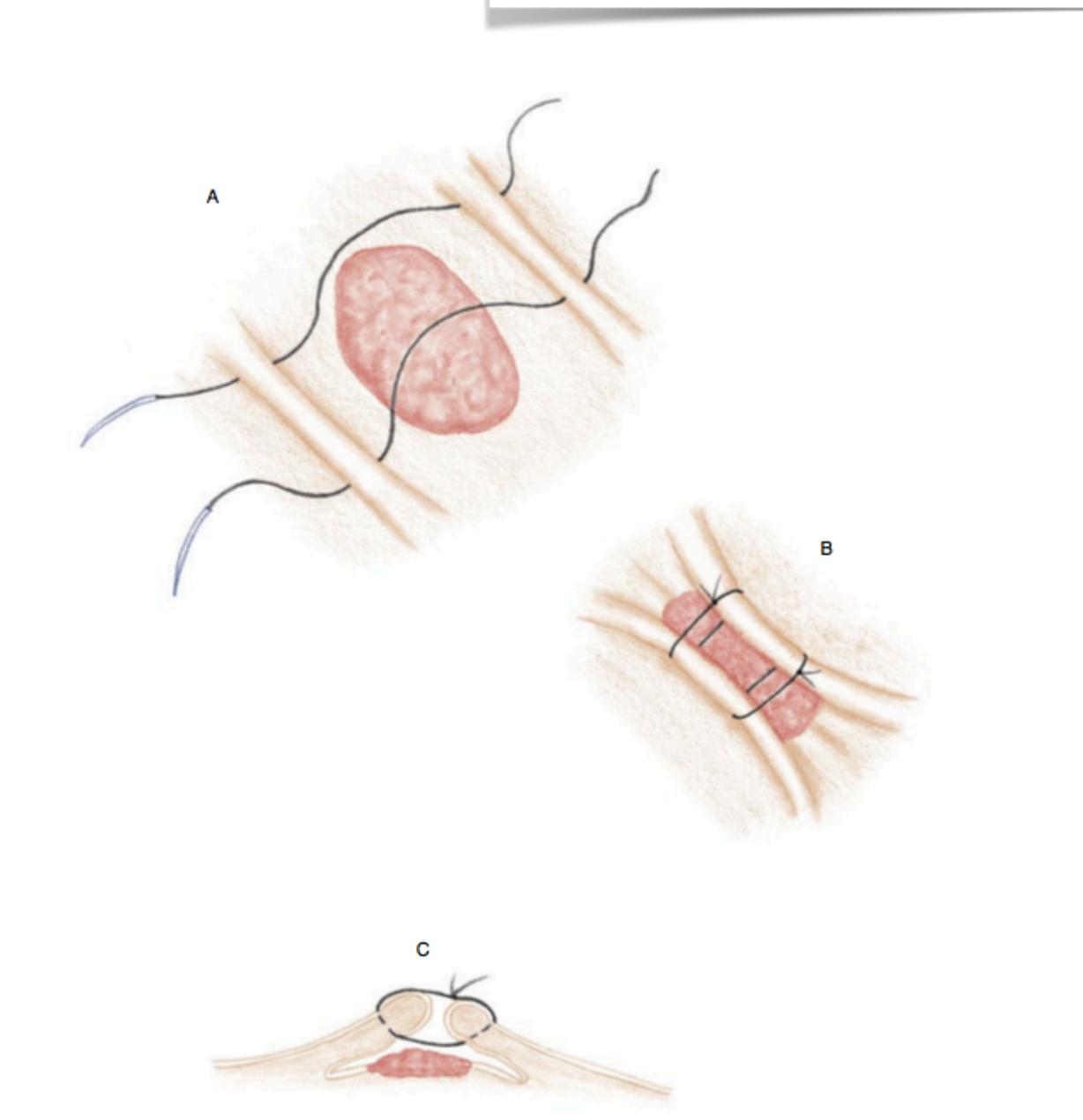
Walking sutures

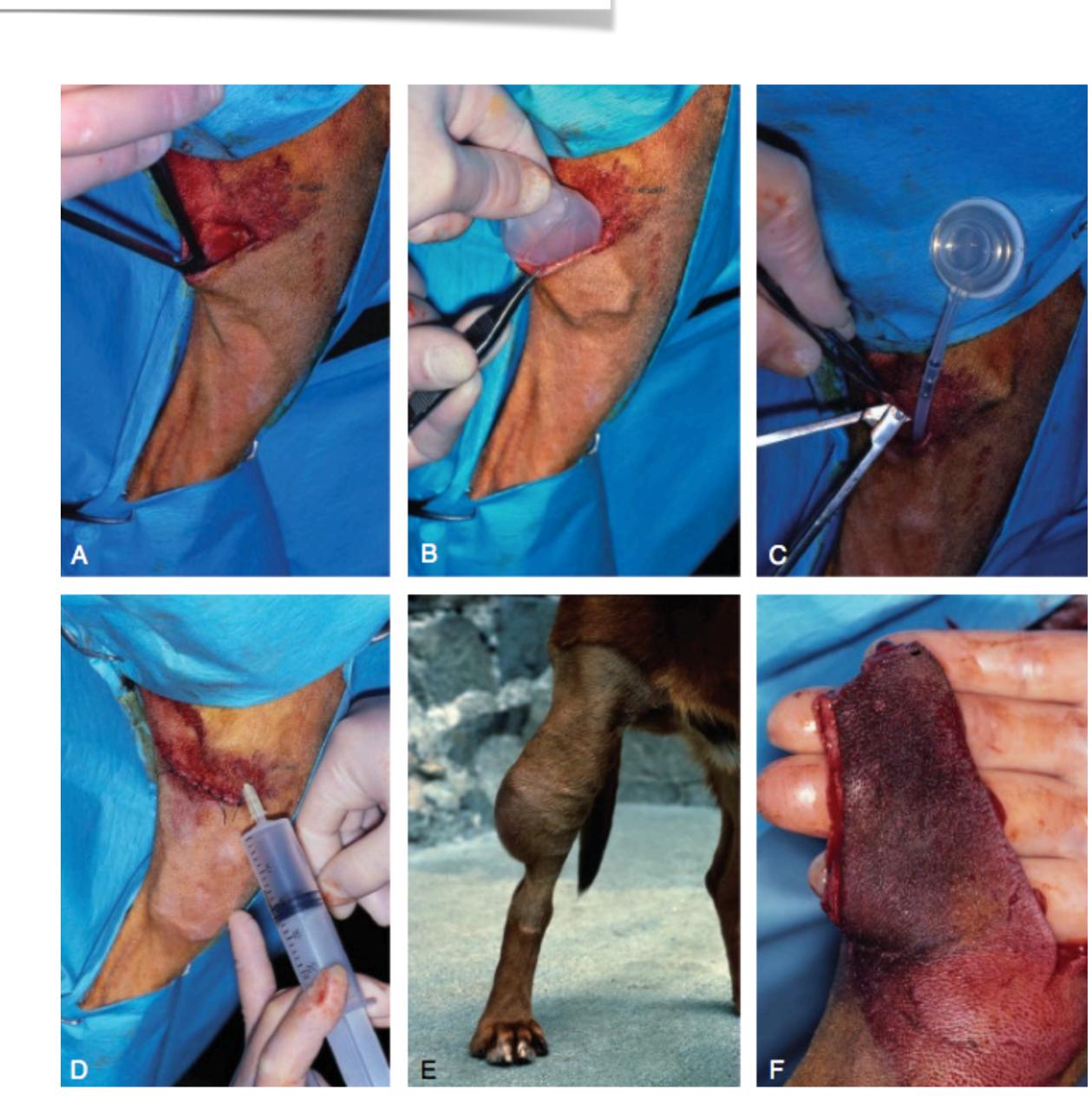






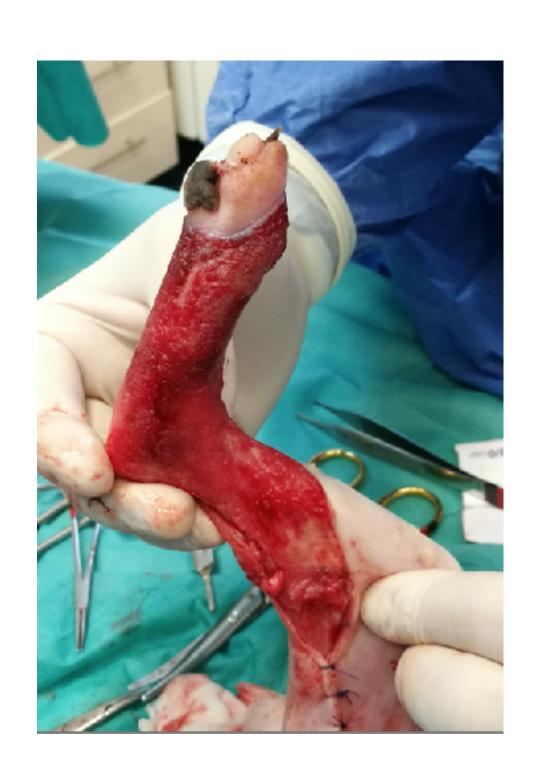
Skin expanding techniques





Wound closure decision making

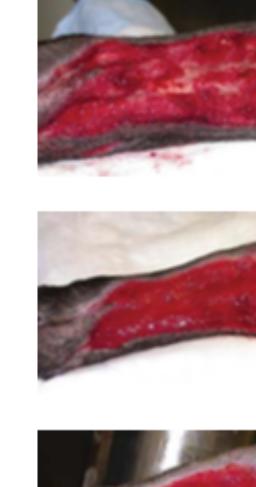
- Location
- Age
- Type
- Severity
- Contamination



If several techniques have <u>equal chances</u> => the simplest.

Wound closure decision making

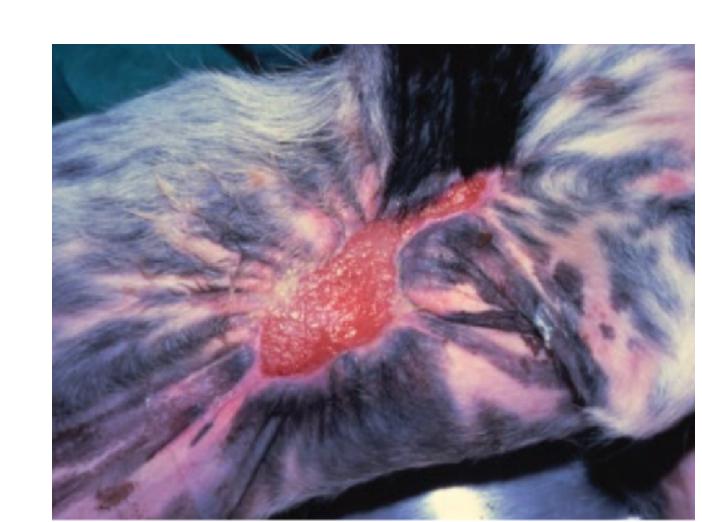
- Second intention healing
- -Extensive bandaging and follow-up.
- -May eventually more costly.
- -Often- poor quality epithelium, cicatrix contractures.







Skin flaps and grafts can be used to avoid these drawbacks.

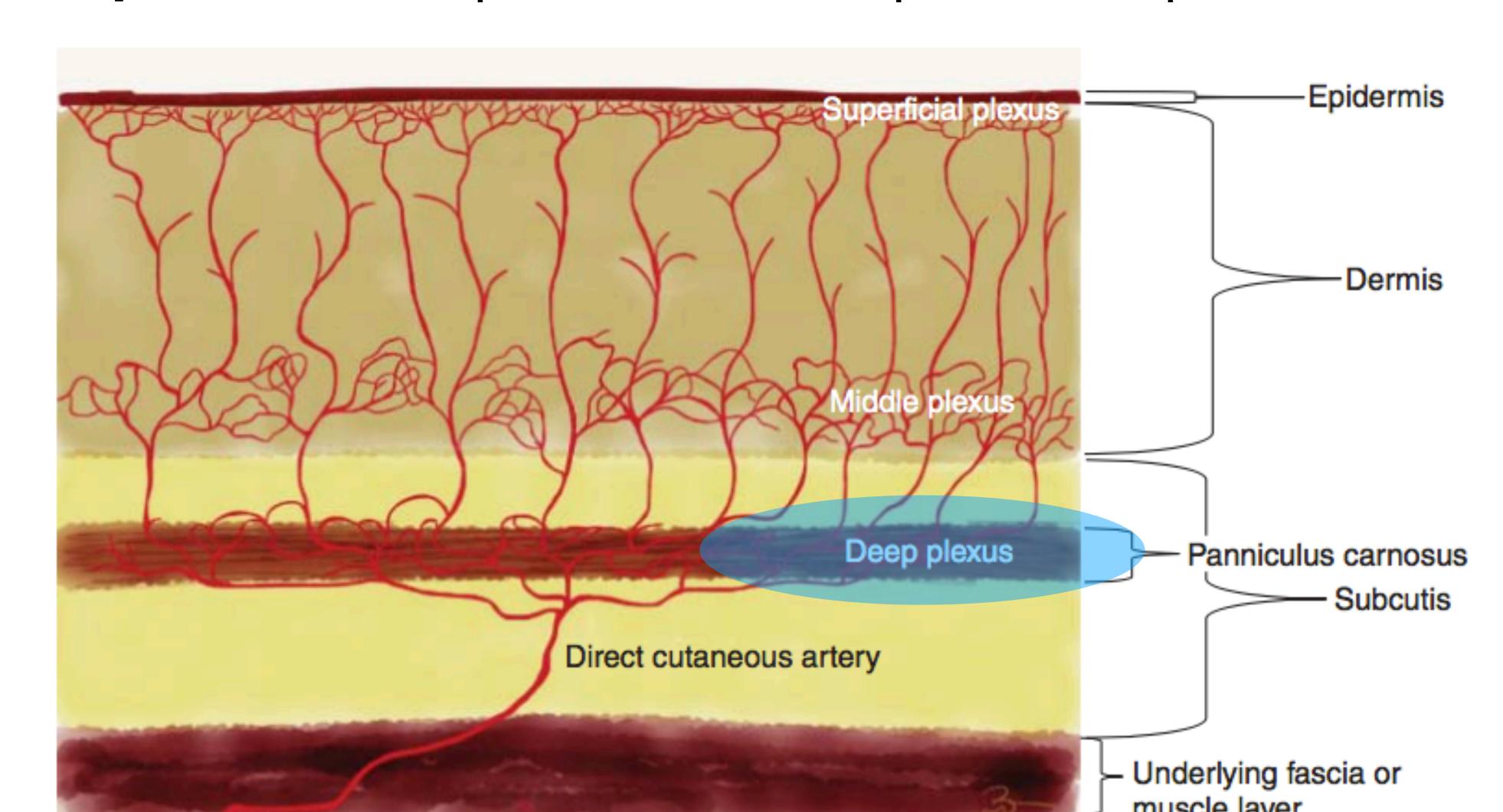


Skin flaps



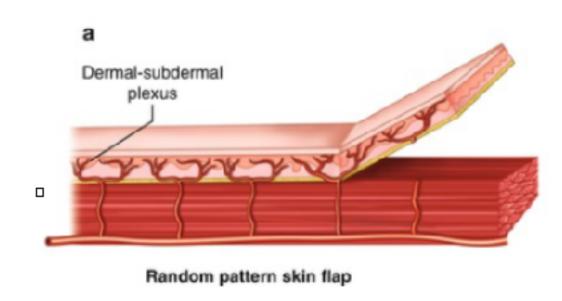
Vascular anatomy of the skin

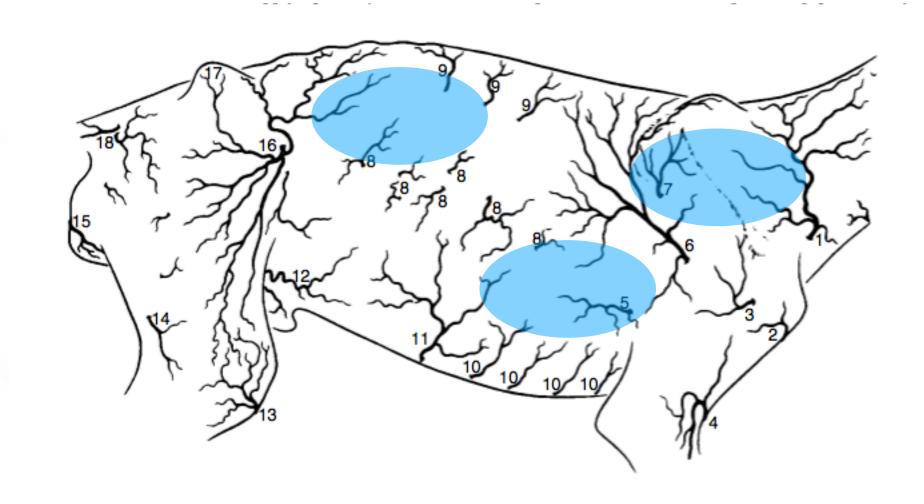
The deep subdermal plexus- most important to preserve.



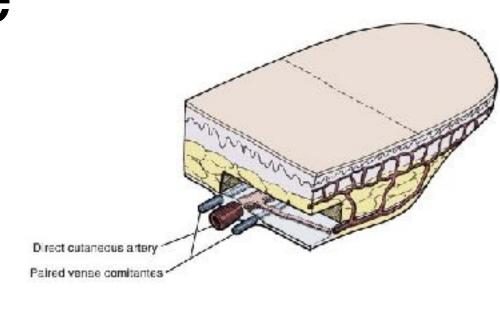
Skin flaps

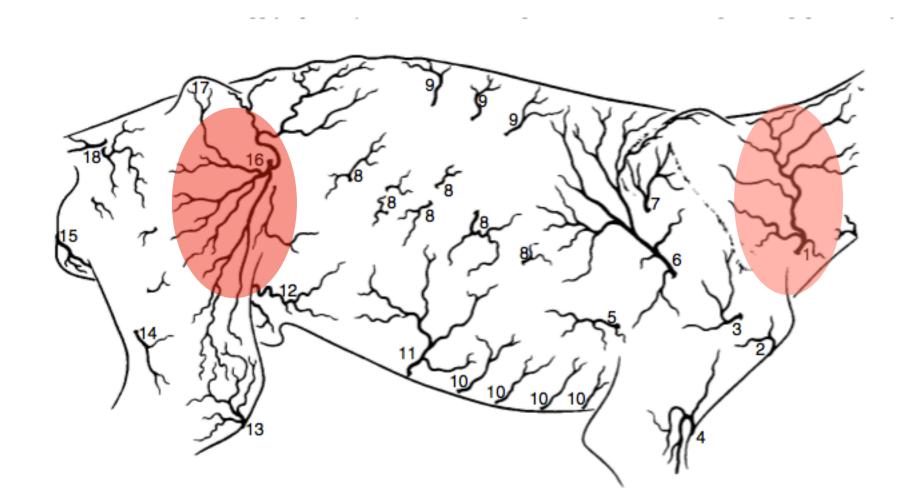
Subdermal (Random)- rely on the subdermal vascular plexus.





Axial - rely on a direct large cutaneous artery.

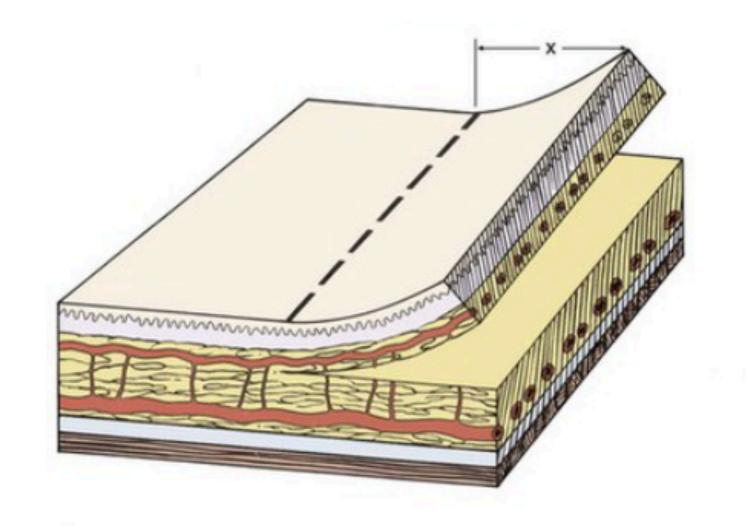


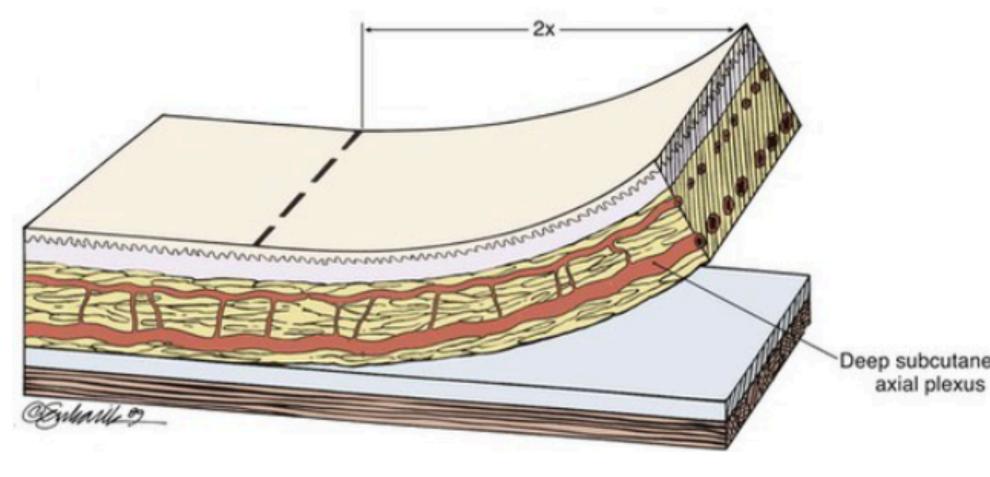


Skin flaps

Subdermal (Random) flaps

- Any location and direction.
- Limited length- 1.5 to 2 times longer than they are wide.





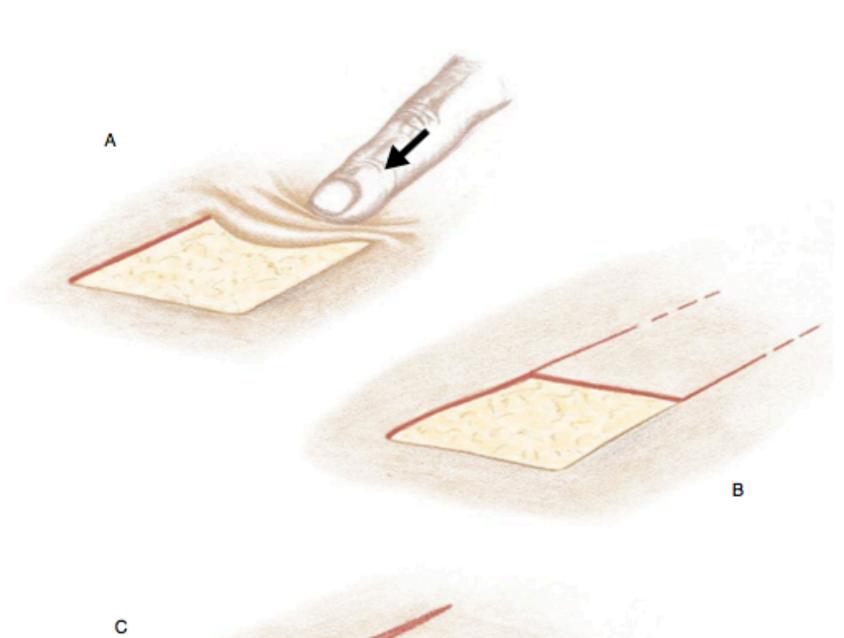
Subdermal flaps

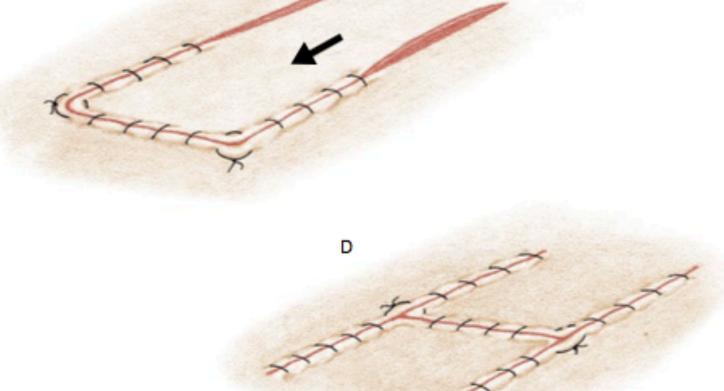
Can either be ocal or distant.

- Local flaps:
- -advancement
- -rotation
- -transposition
- -interpolation flaps

Distant flaps:

-hinge and pouch flaps





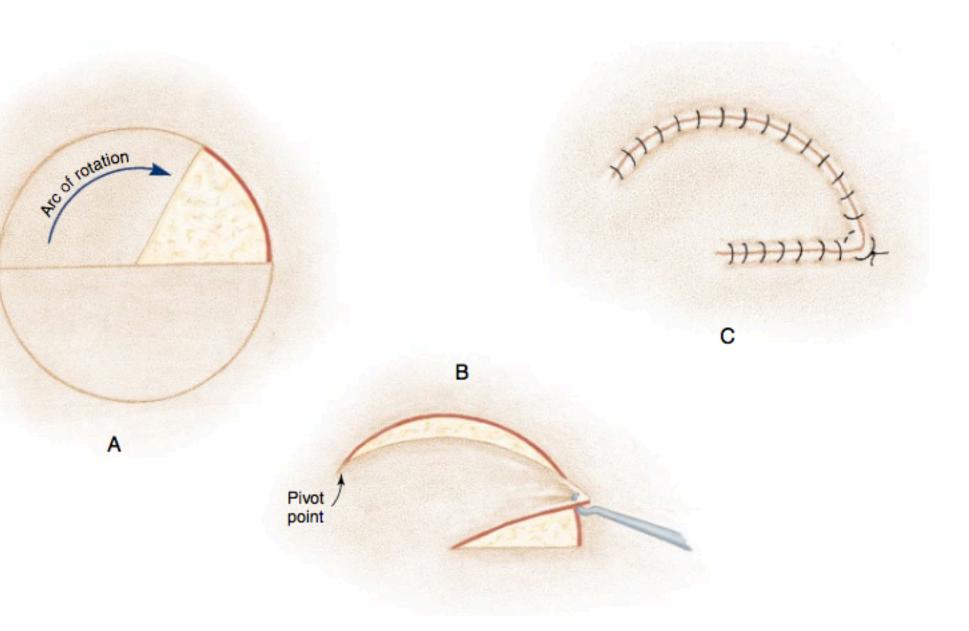
Local advancement flap

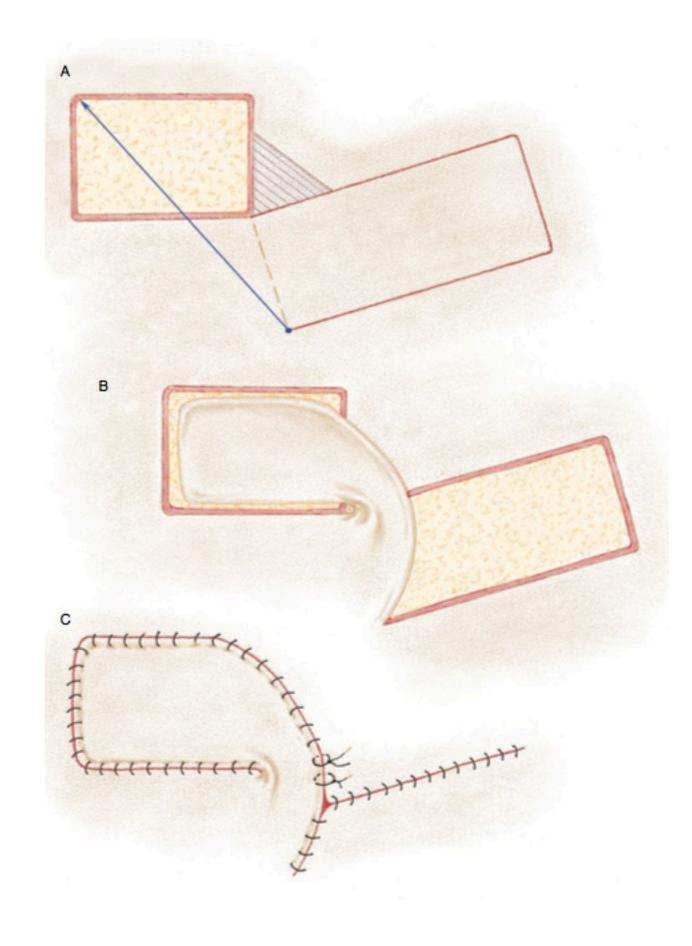
Local flaps

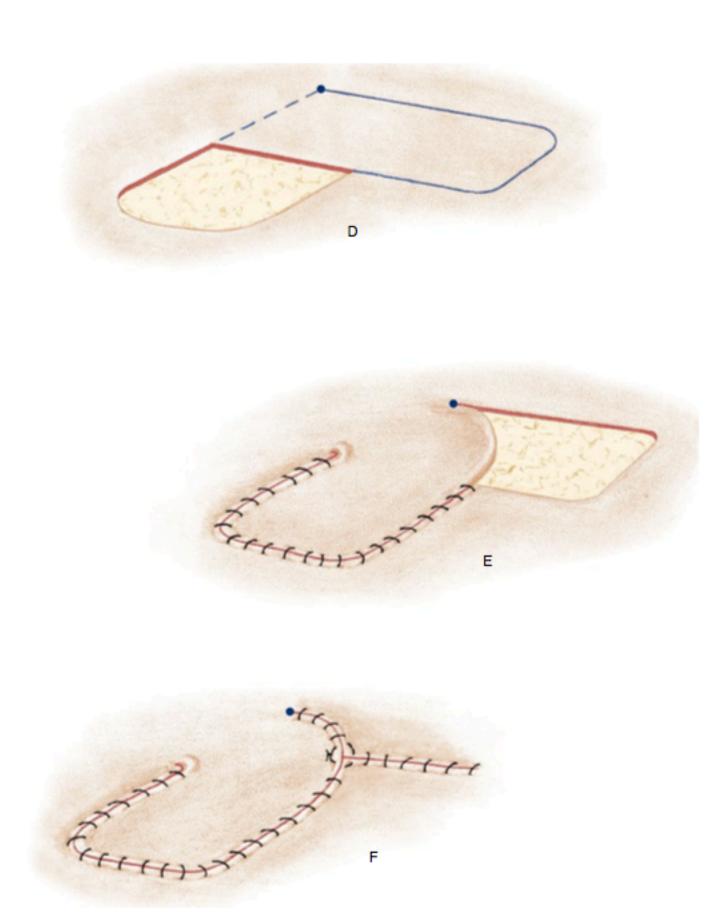
Rotational flap

Transposition flap- oblique

Transposition flap 90 degrees

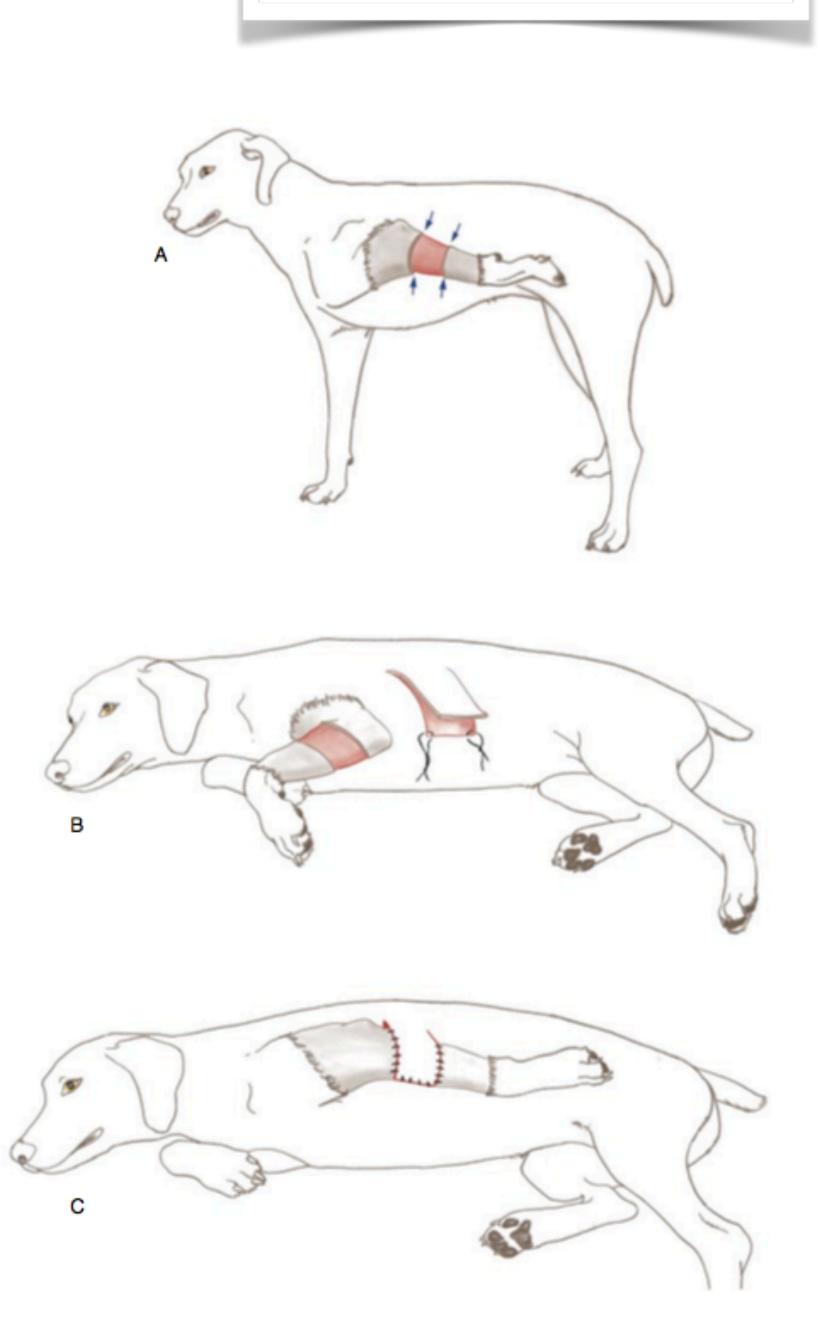


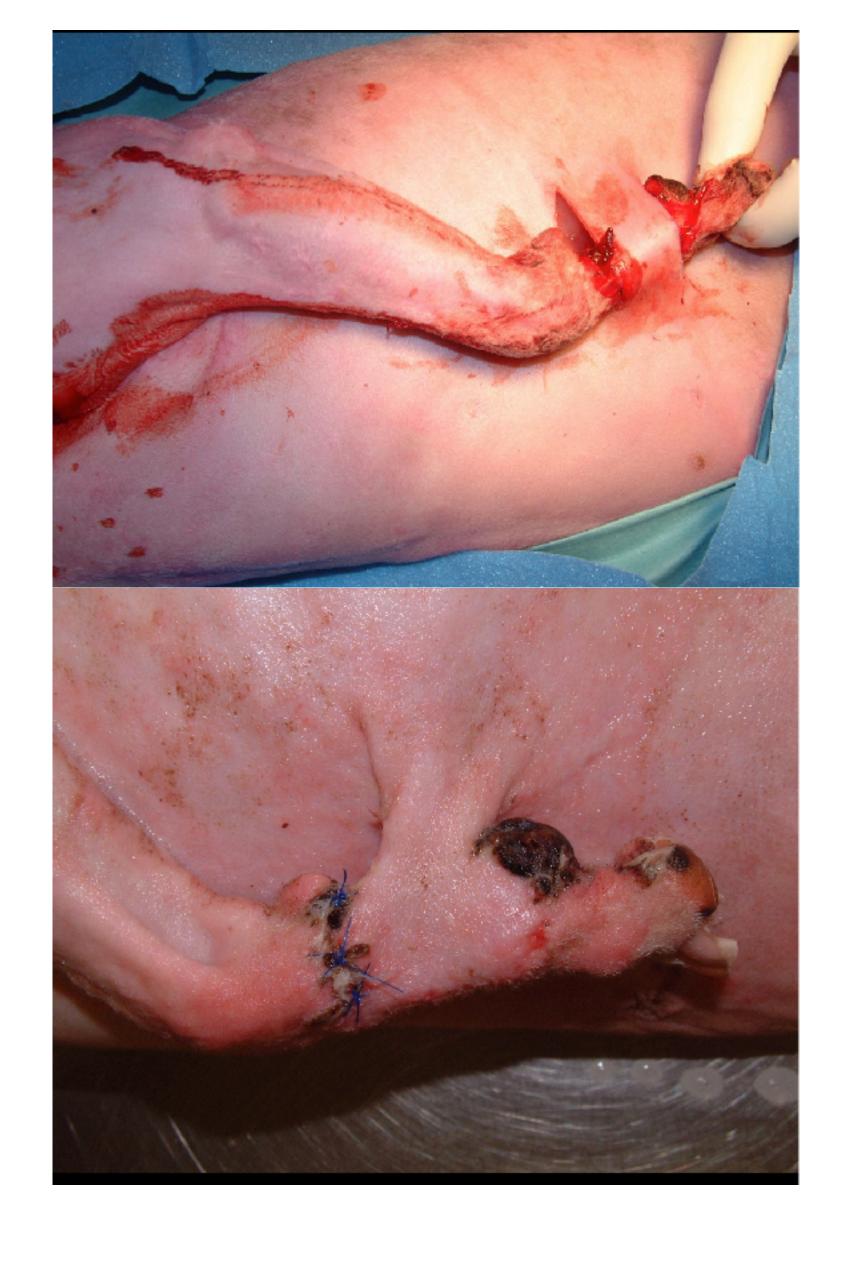




Distant flaps

Pouch flap

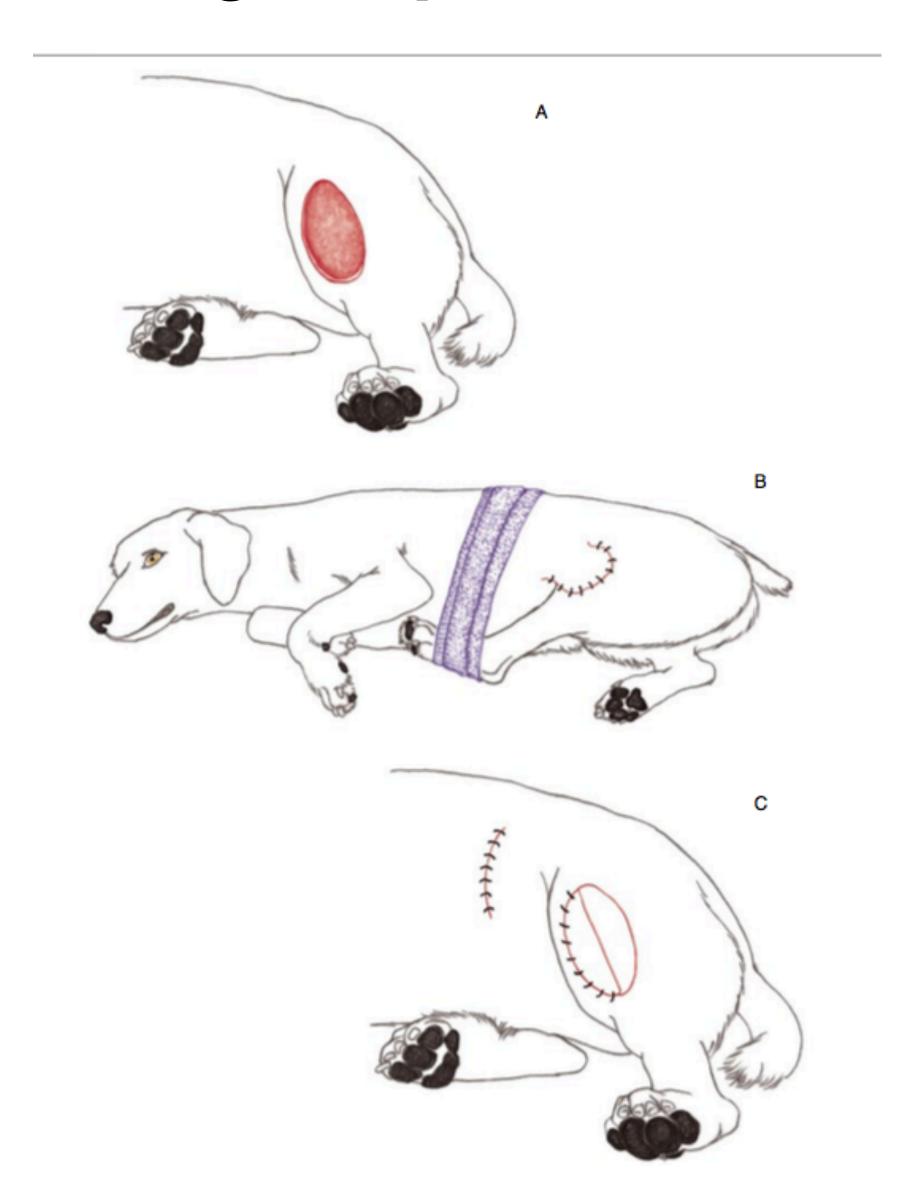




http://www.animalcancersurgeon.com

Distant flaps

Hinge flap

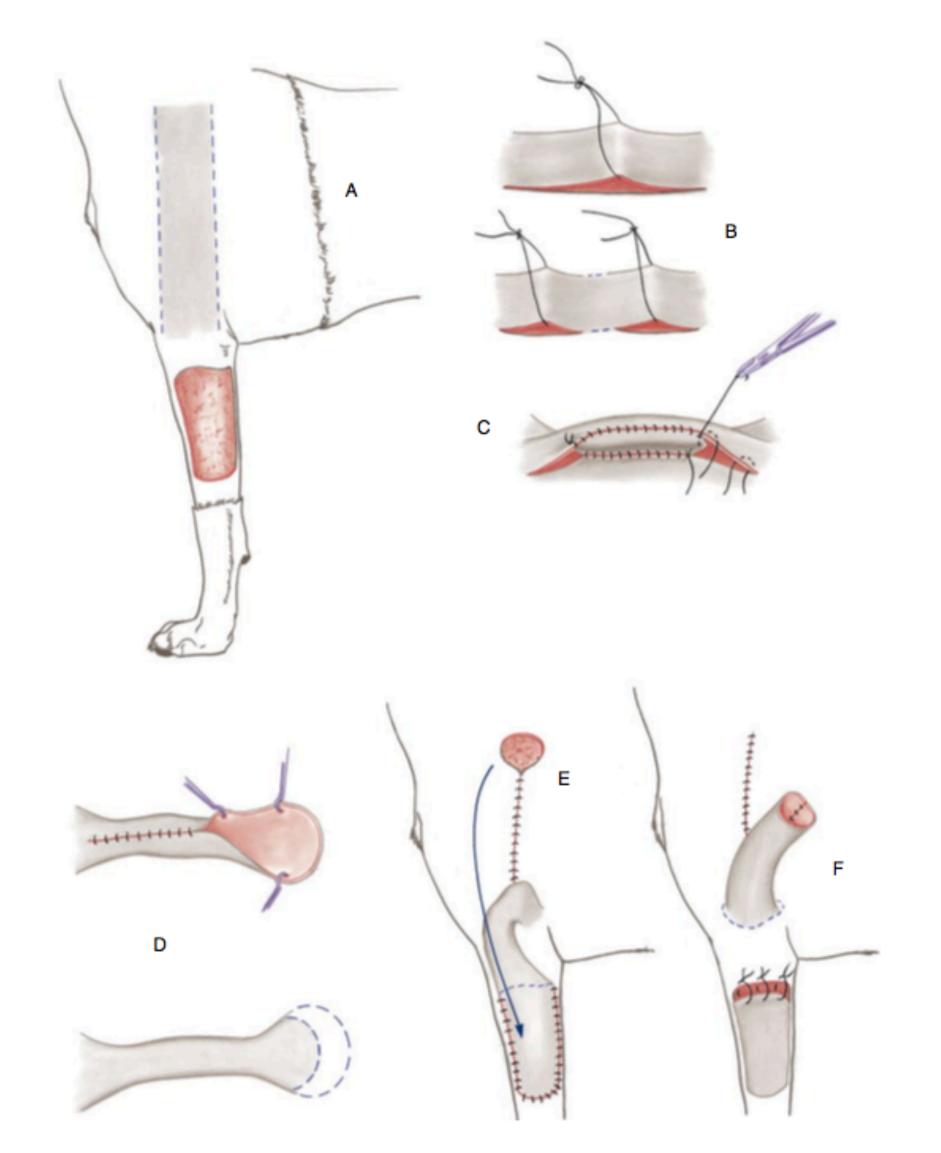




http://www.animalcancersurgeon.com

Distant flaps

Tube flap



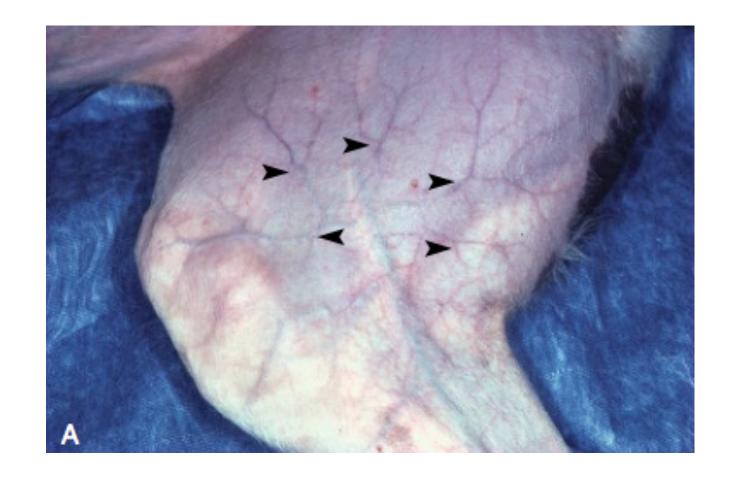


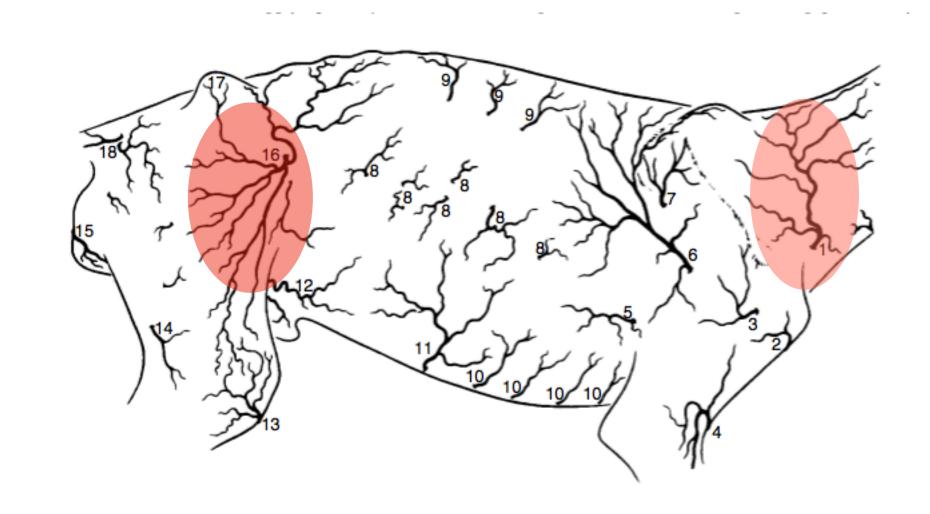
http://www.animalcancersurgeon.com

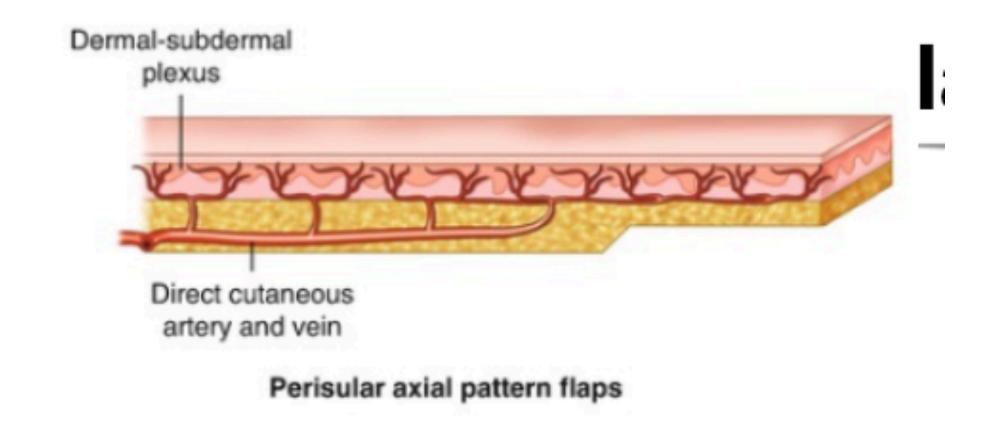
Axial pattern flaps

• Angiosome - area of skin vascularised by a major cutaneous artery, after which it is named.

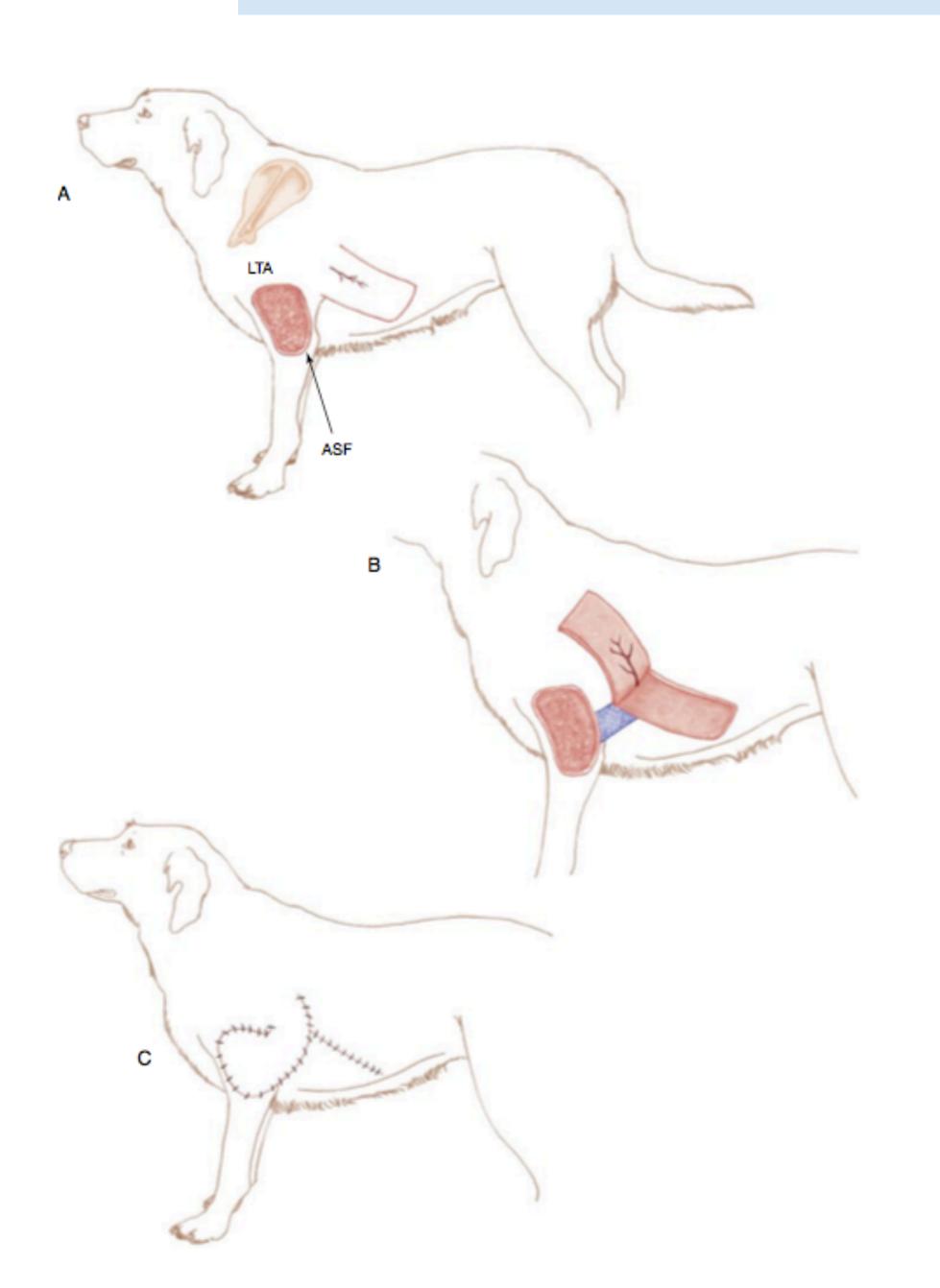
More robust and survive on greater lengths.



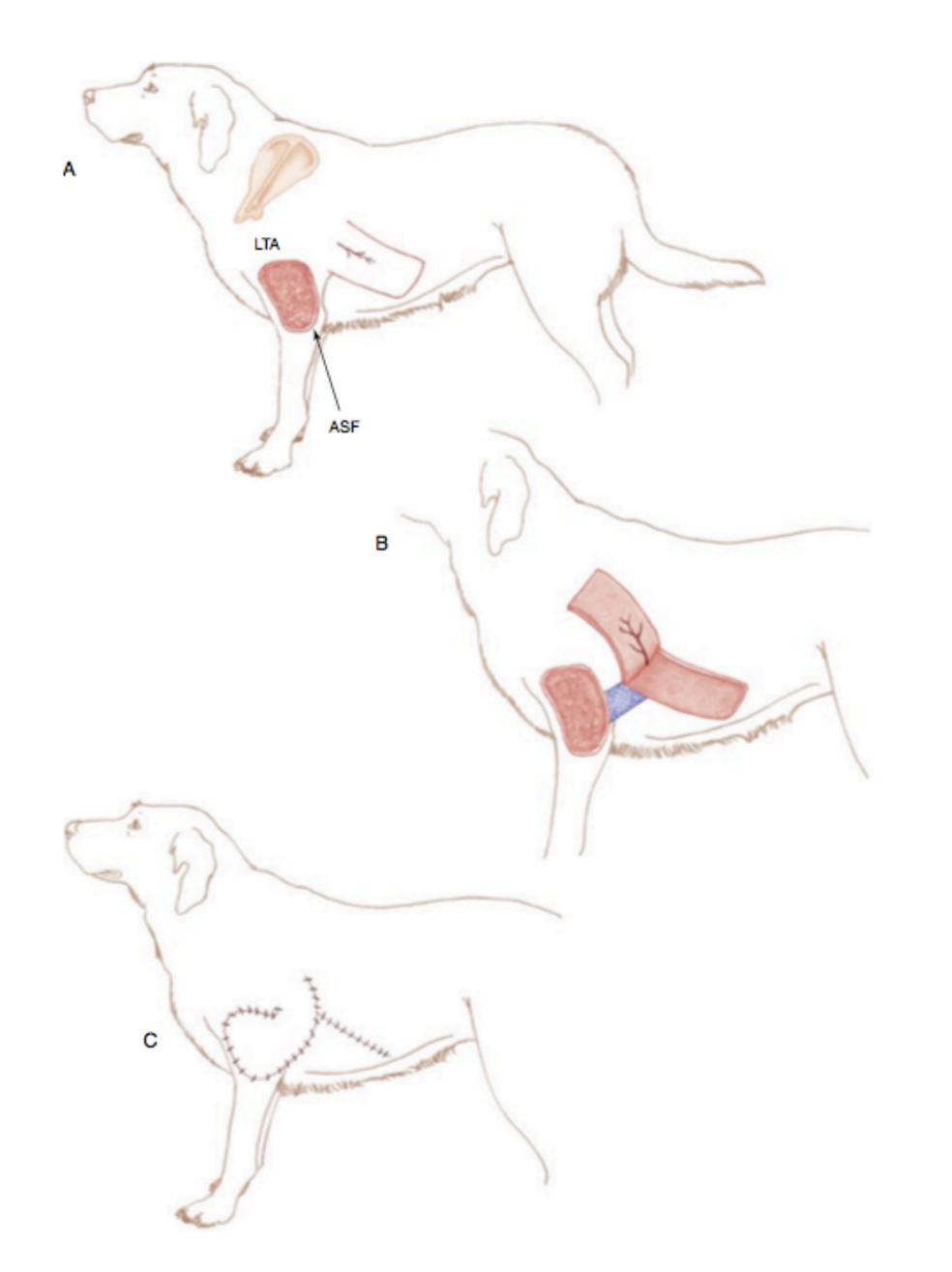




Lateral Thoracic Axial Pattern Flap



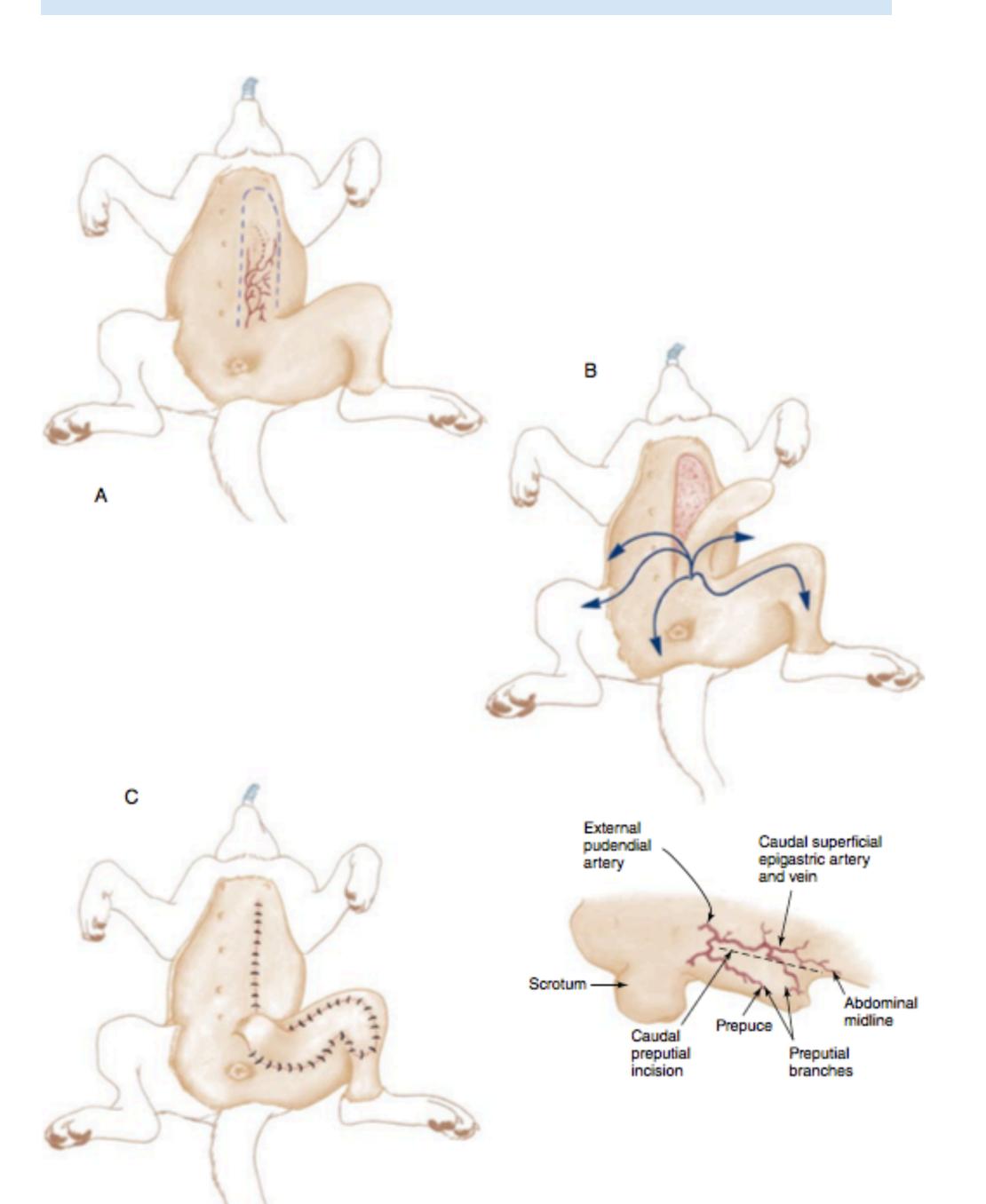
Lateral Thoracic Axial Pattern Flap



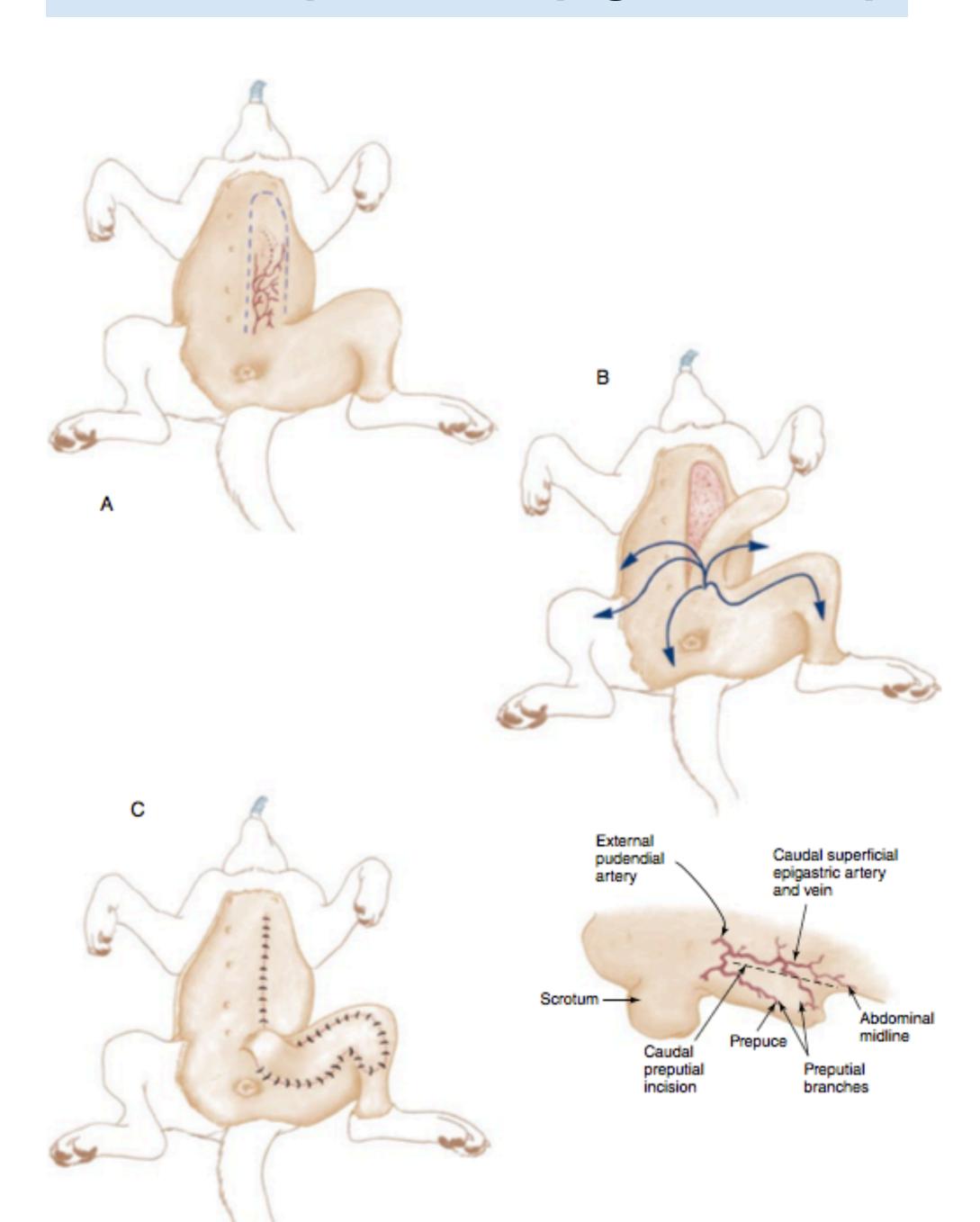




Caudal Superficial Epigastric Flap



Caudal Superficial Epigastric Flap

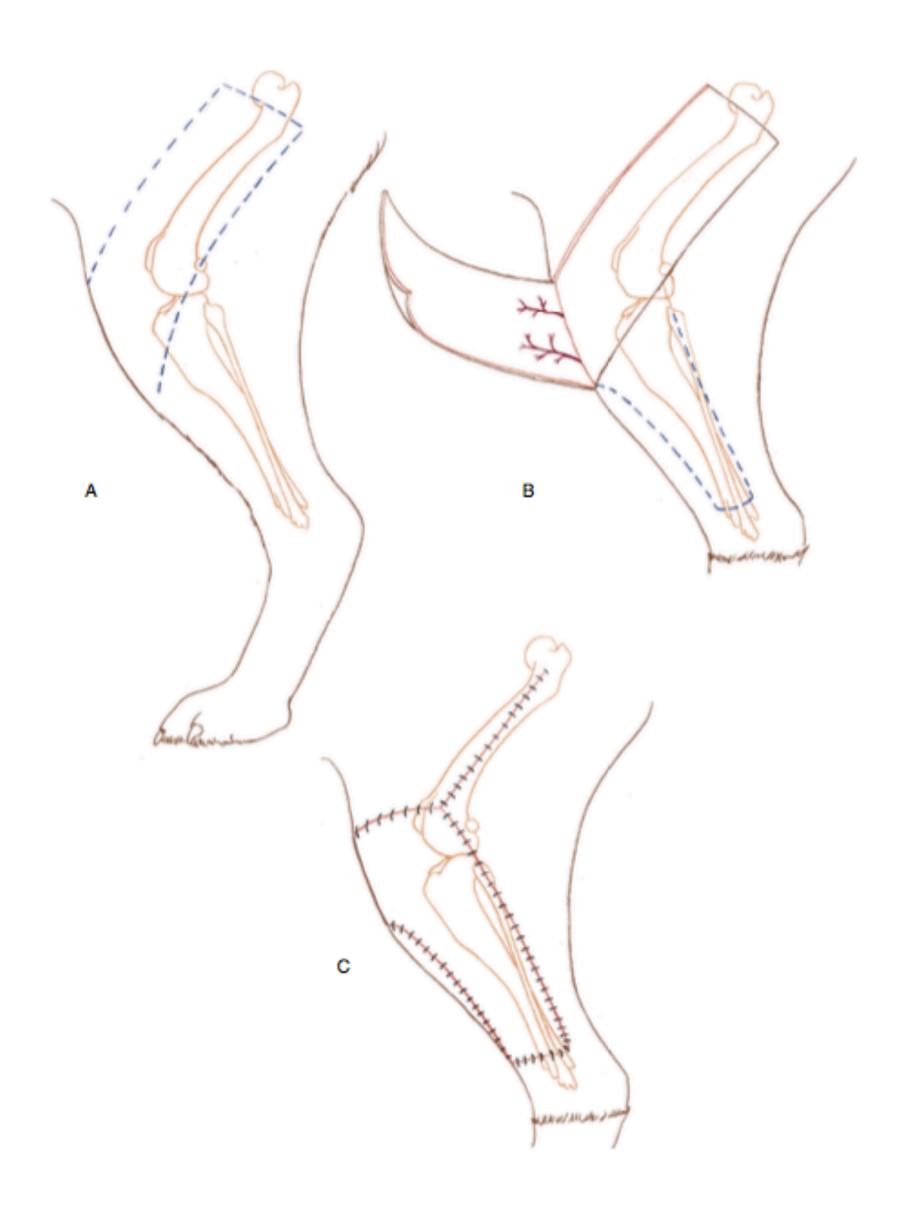




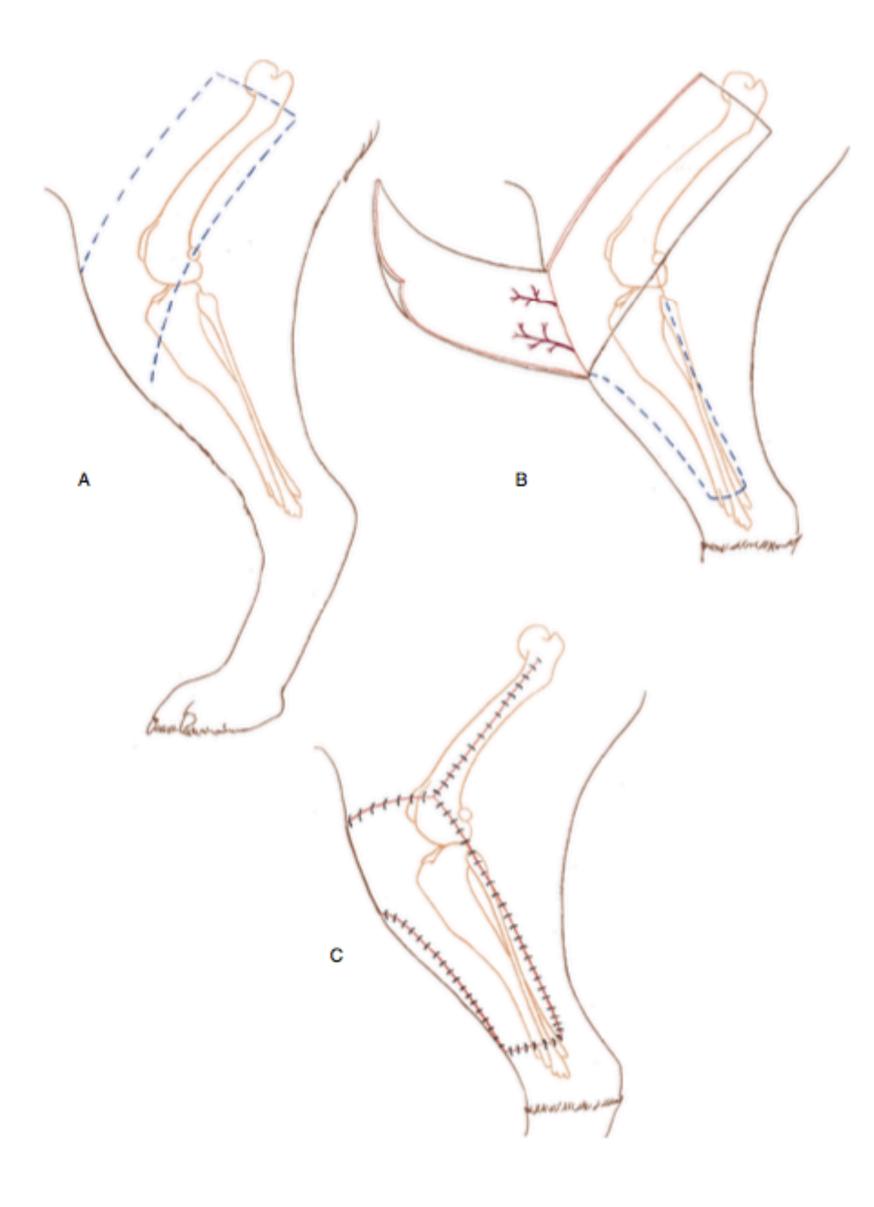


http://www.animalcancersurgeon.com

Genicular Axial Pattern Flap



Genicular Axial Pattern Flap





9 y old, pit bull, fibrosarcoma removal

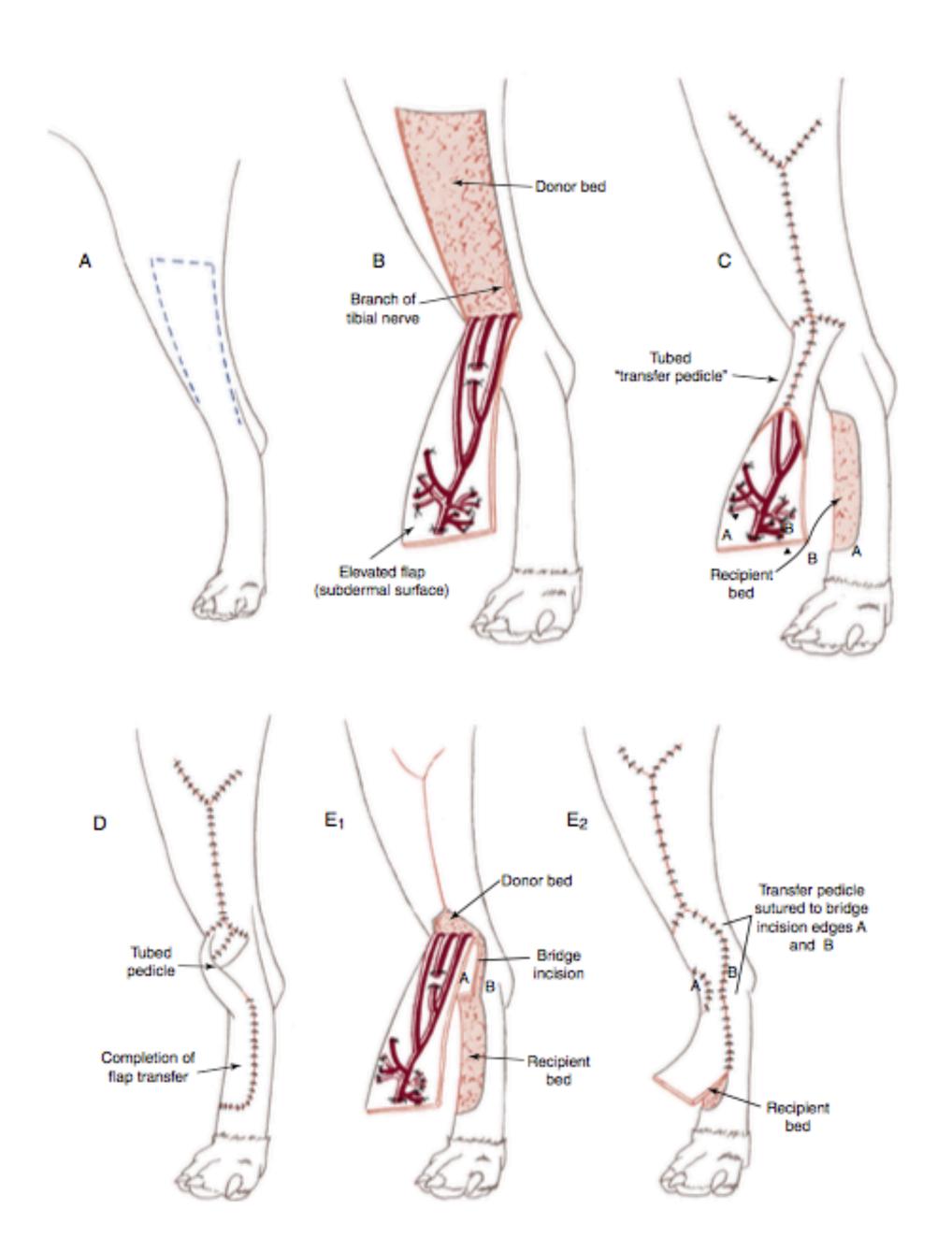


Genicular Axial Pattern Flap

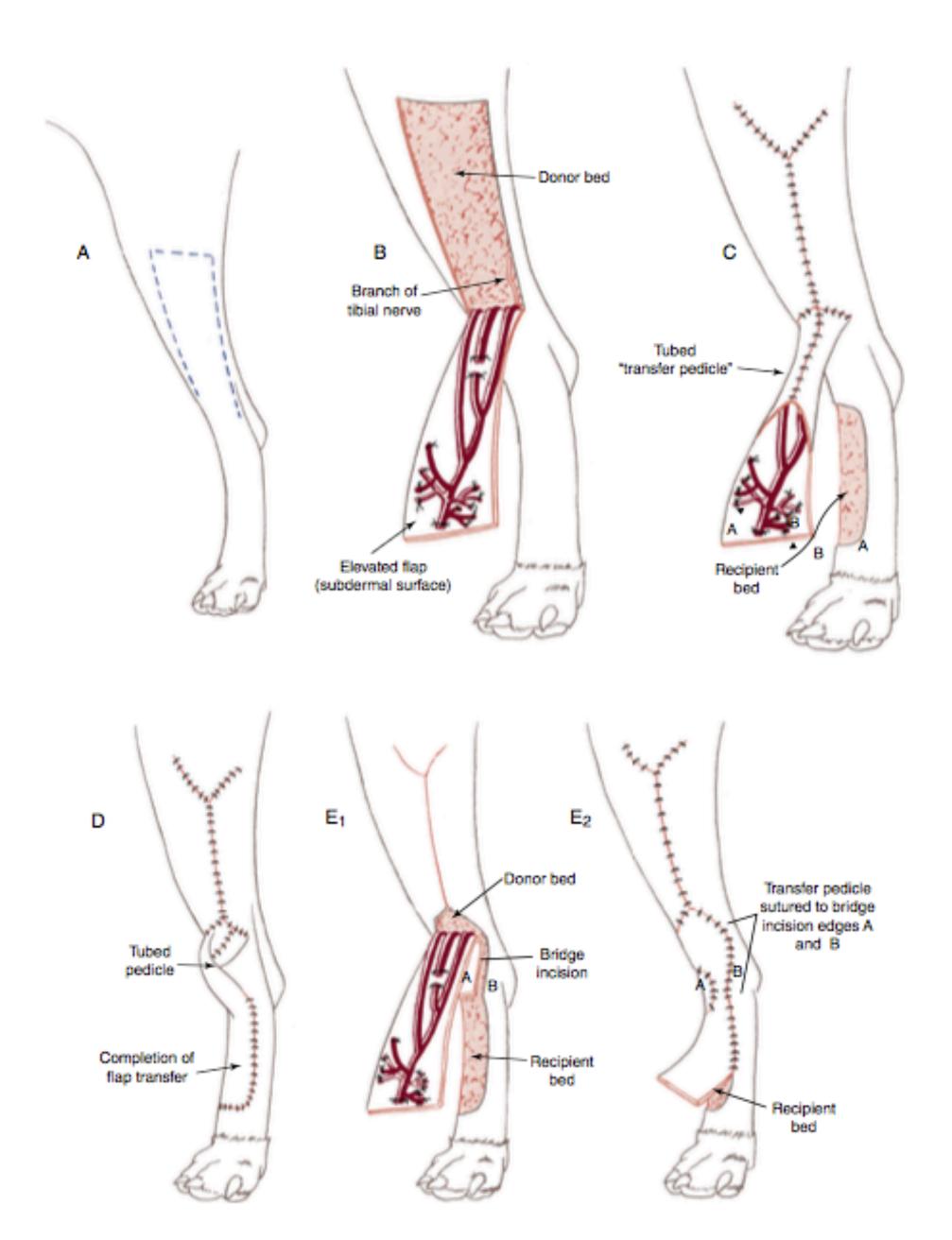




Reverse Saphenous Conduit Flap



Reverse Saphenous Conduit Flap







http://www.animalcancersurgeon.com

Case 1

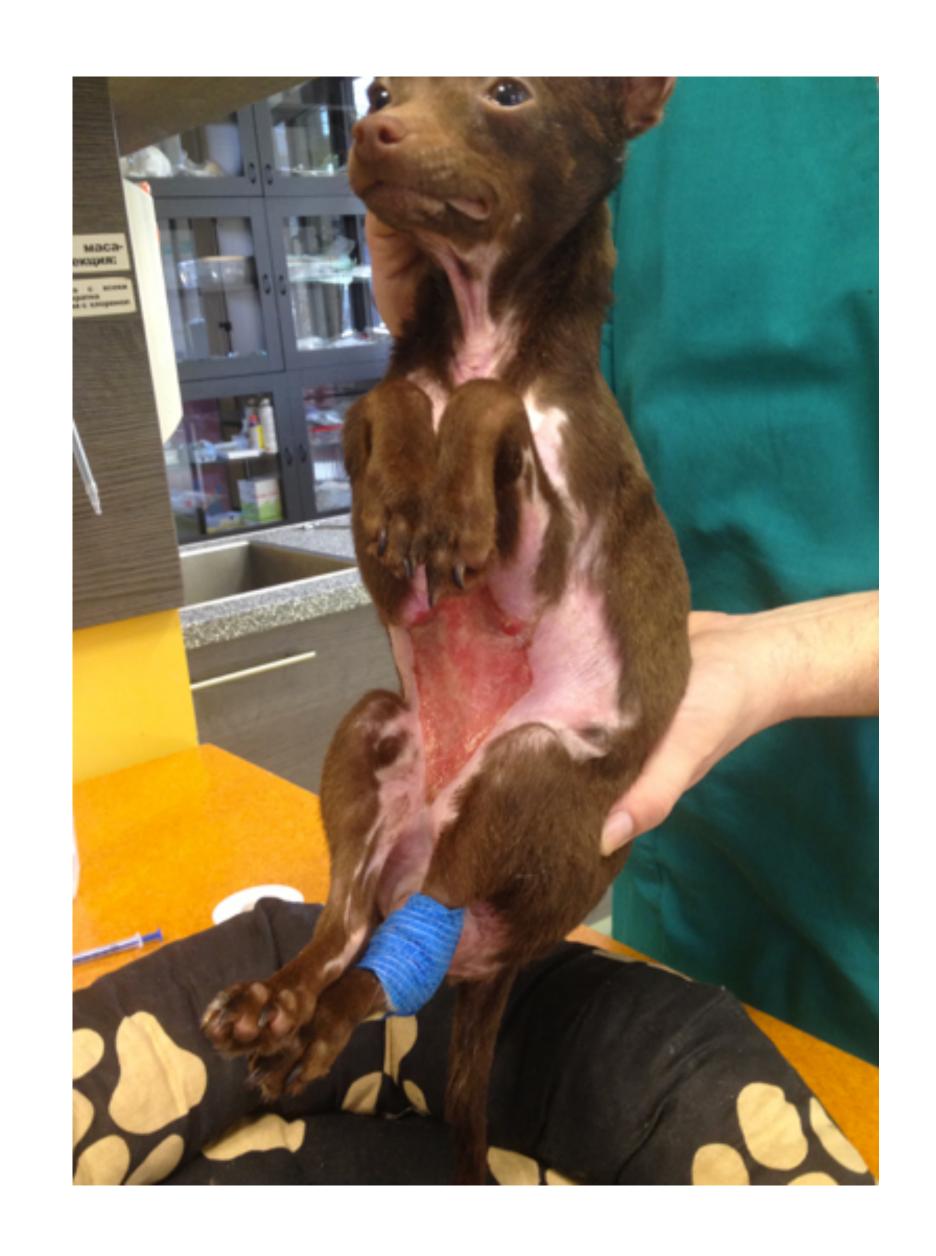
Djanet

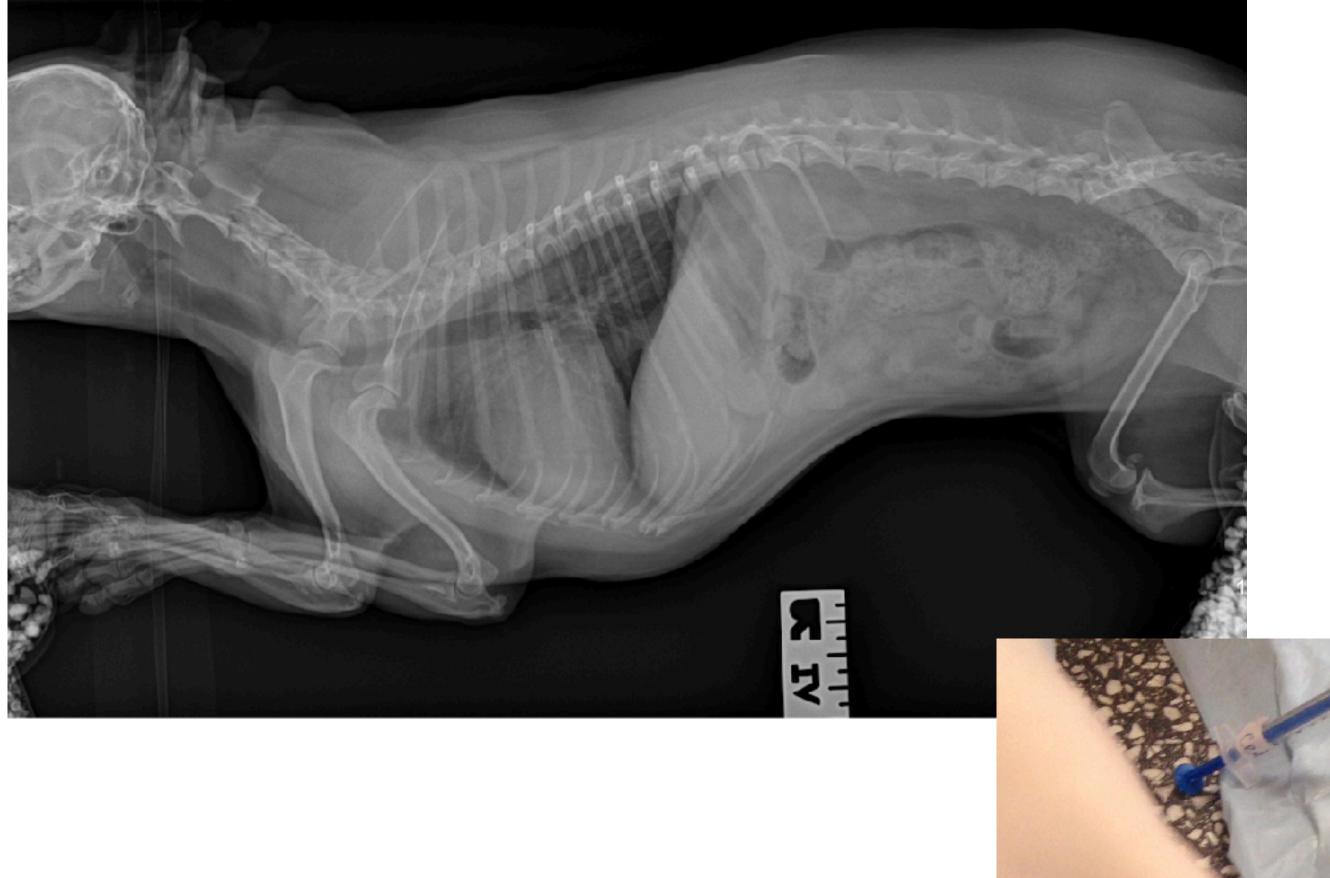
10 m old, female pincher

Severe burn injury- ventral skin area

Conservative treatment for 3 months

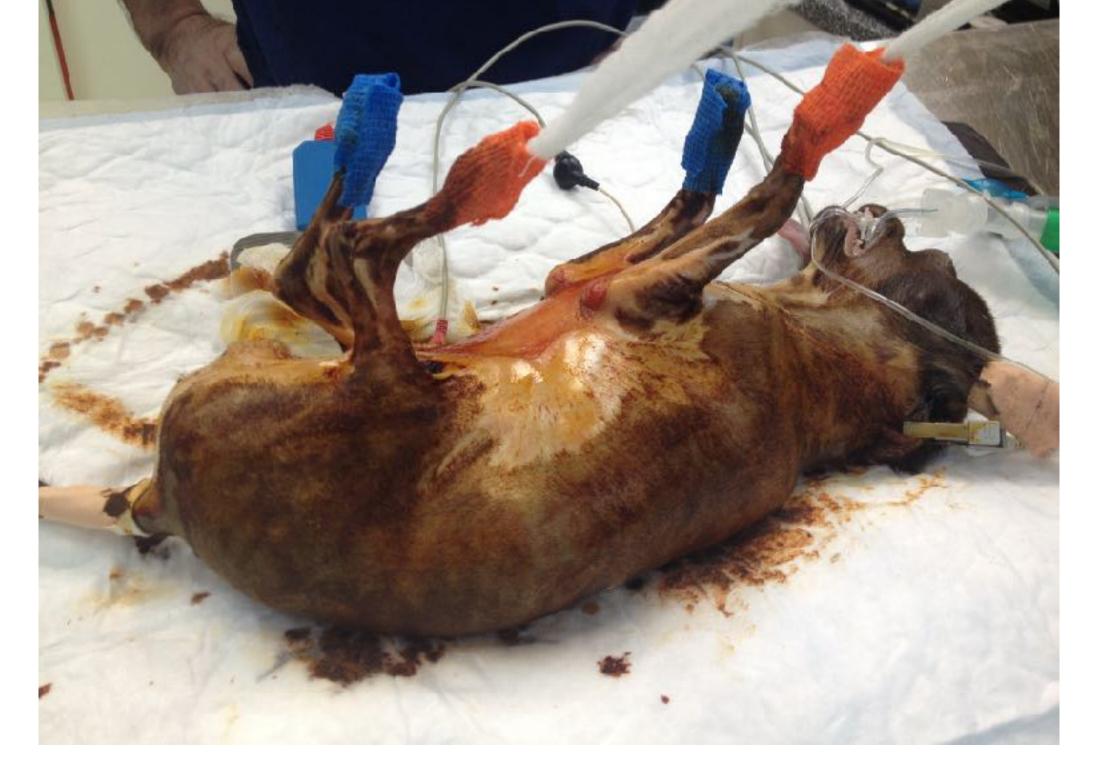
UNABLE TO WALK





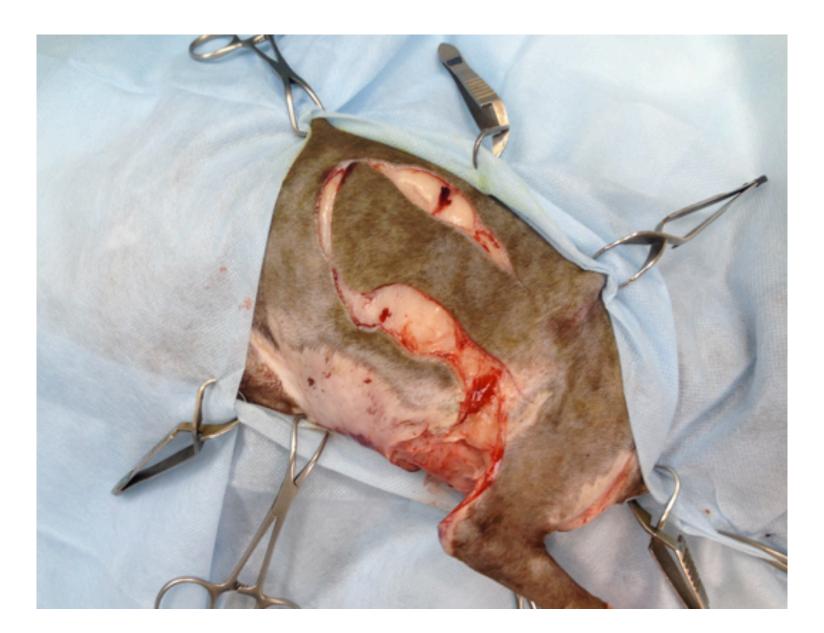








4 advancement flaps surgeries





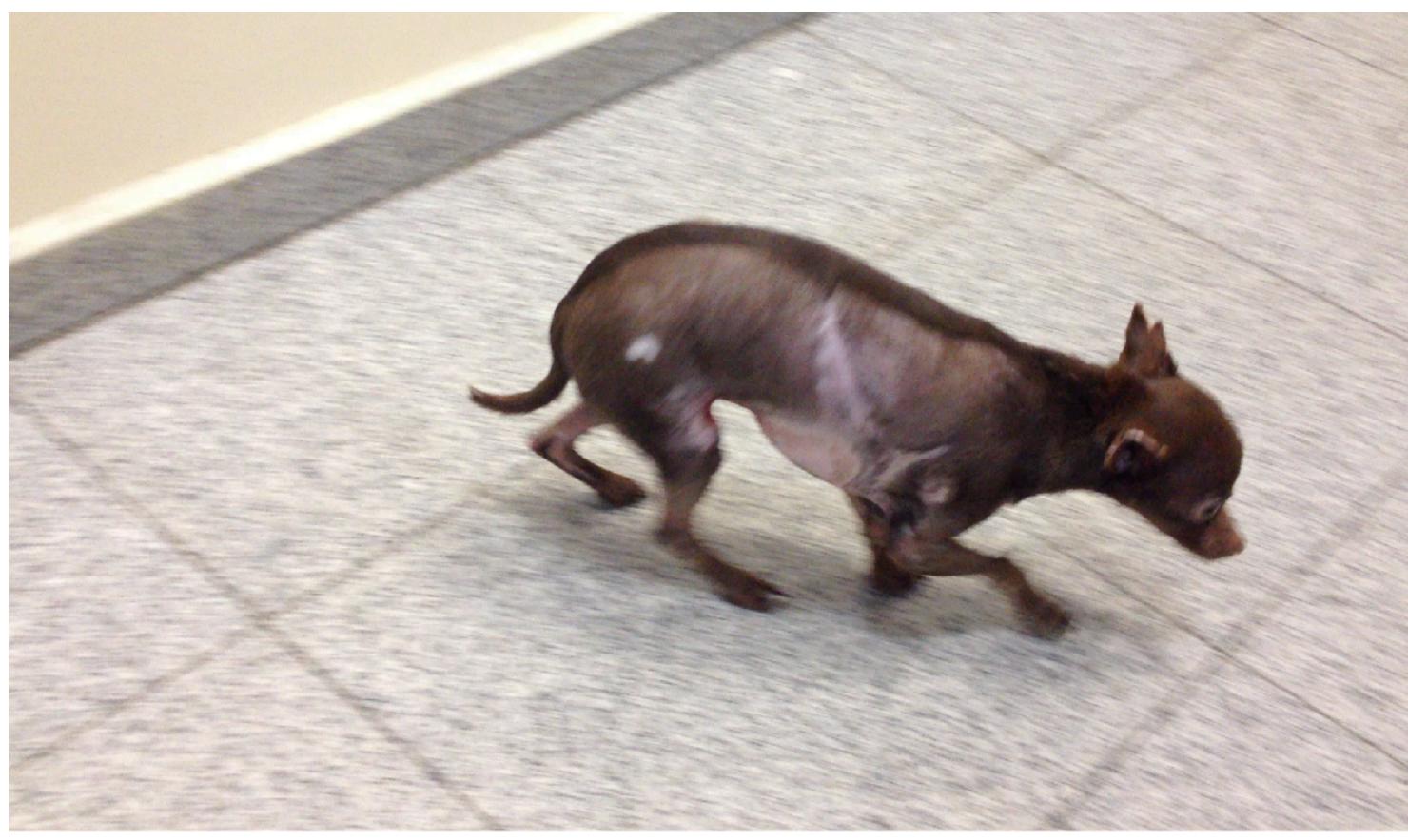






80 days f up







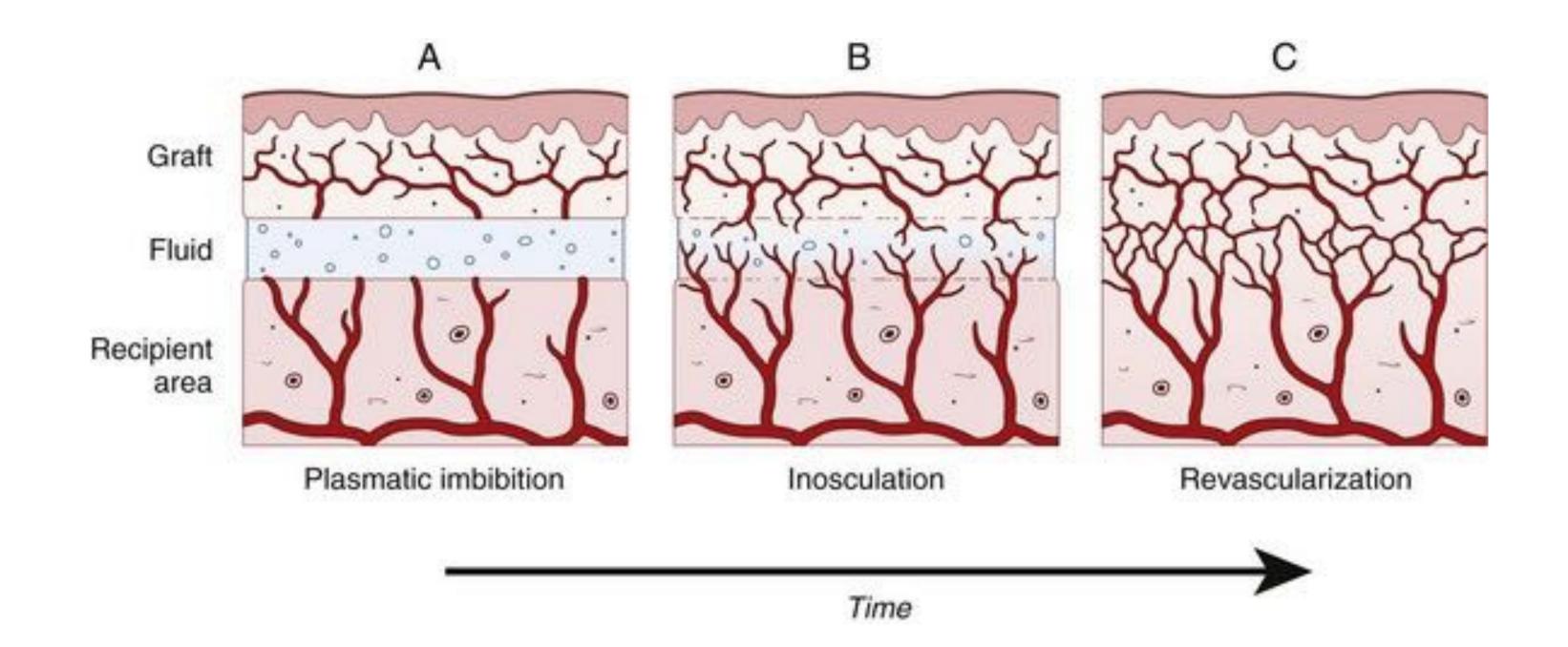
110 days f up



Skin grafts



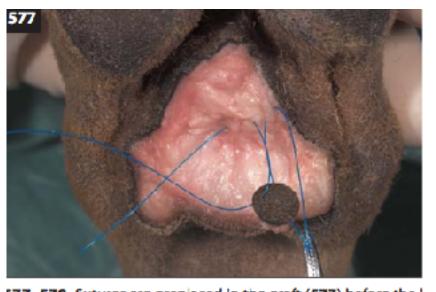
- Partial-thickness or full-thickness.
- No vascularization!
- The receiving bed must be <u>healthy and well-vascularised</u>.



Pinch and punch grafts

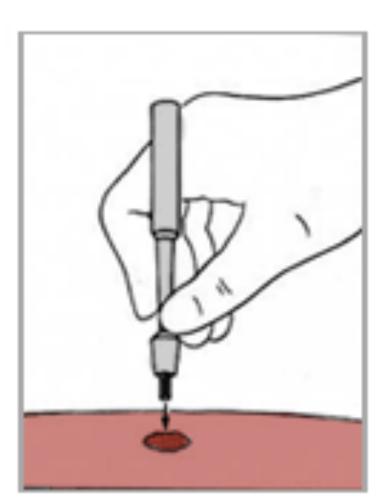
- Easy to perform
- Very good drainage
- Cosmetic aspect is rather poor.

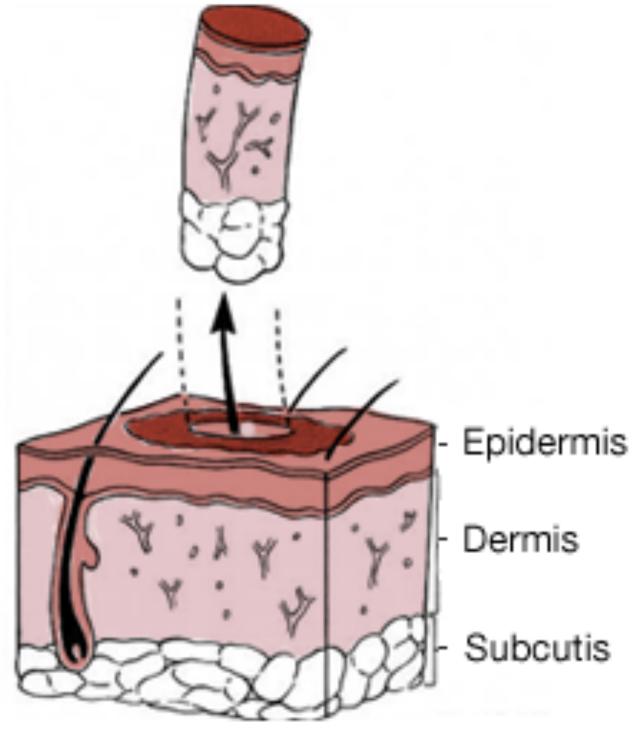




577, 578 Sutures are preplaced in the graft (577) before the

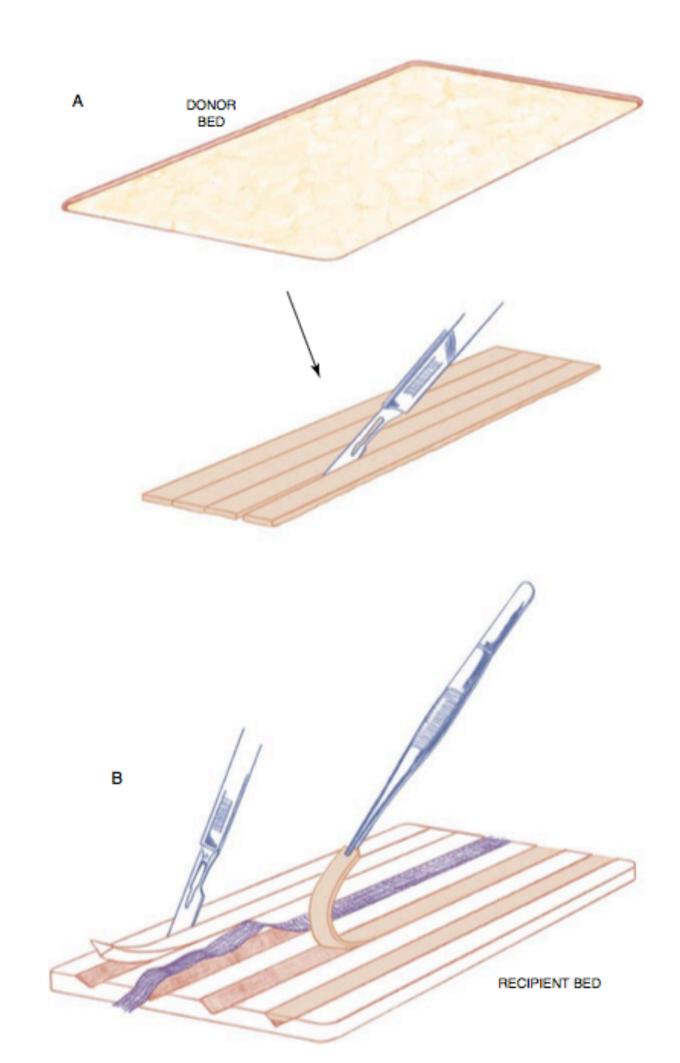






Strip grafts

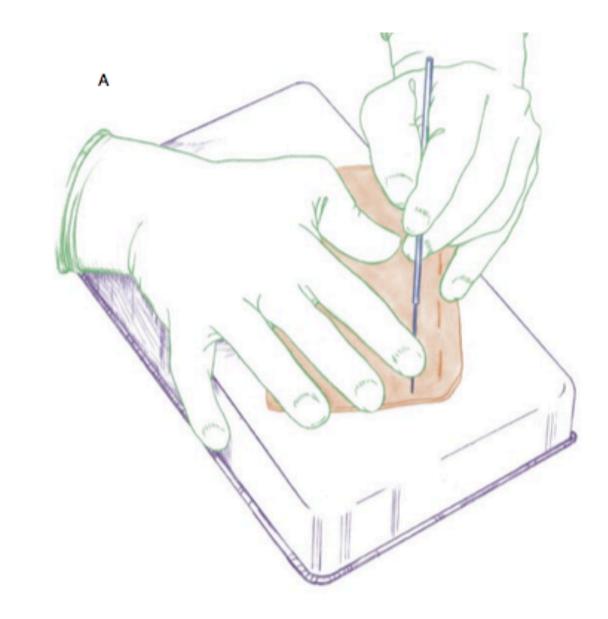
Good drainage, poor cosmetic results.

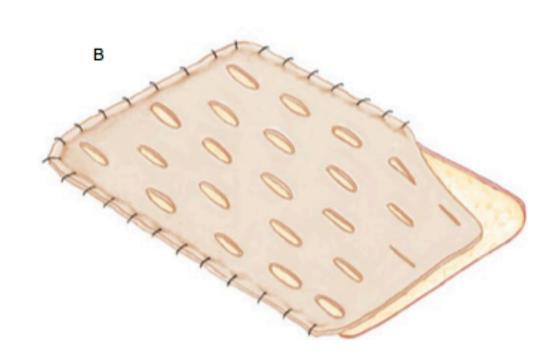




Mesh grafts

- Time consuming
- Reasonable drainage
- Faster healing
- Good cosmetic appearance

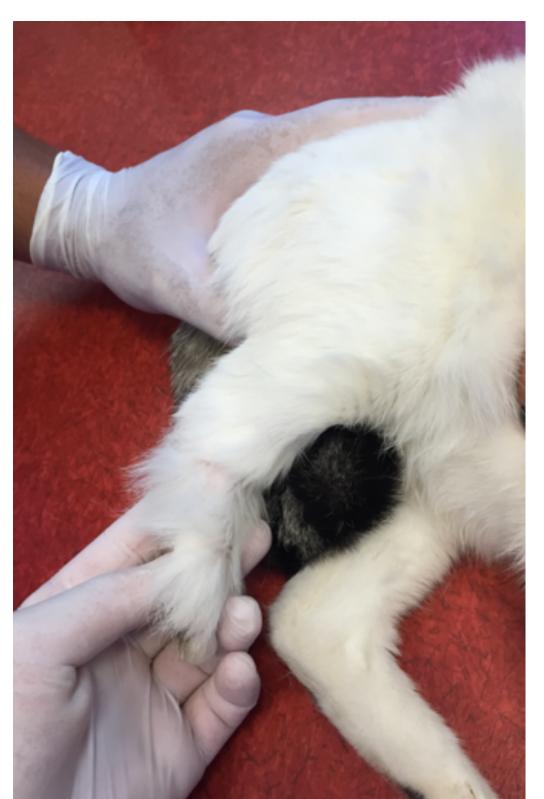














Primary closure





ESF breakage, dehiscence



Mesh grafting





Chronic wounds

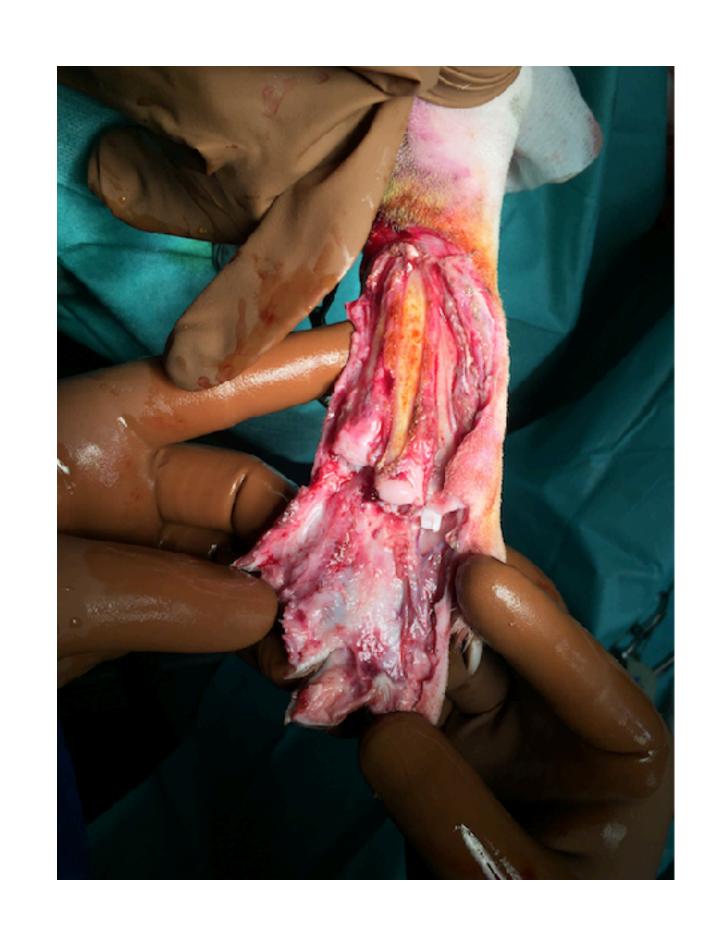
Chronic wounds- <u>prolonged inflammation</u> =>lengthy healing process.

- Fibrosis
- Destructive proteinases
- **Bacterial biofilms**



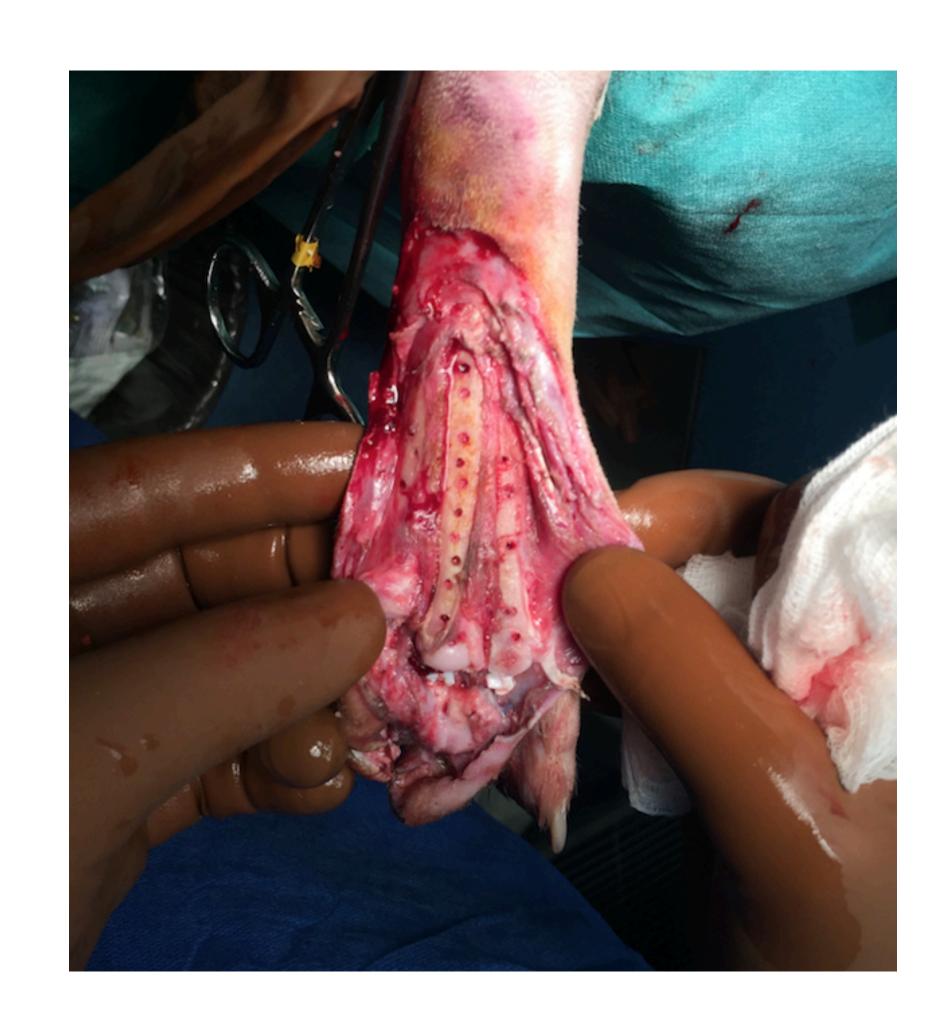
Exposed bones

- Common with <u>shearing</u> and avulsion injuries (mostly Mt and Mc).
- Healing by "creeping coverage" from granulation tissue
- Exposed necrotic bone- removal ?



Exposed bones

- Osteostixis- drilling small holes through the exposed cortical bone
- Capillary buds and granulation proliferation
- Caution- risk of fracturing bones!

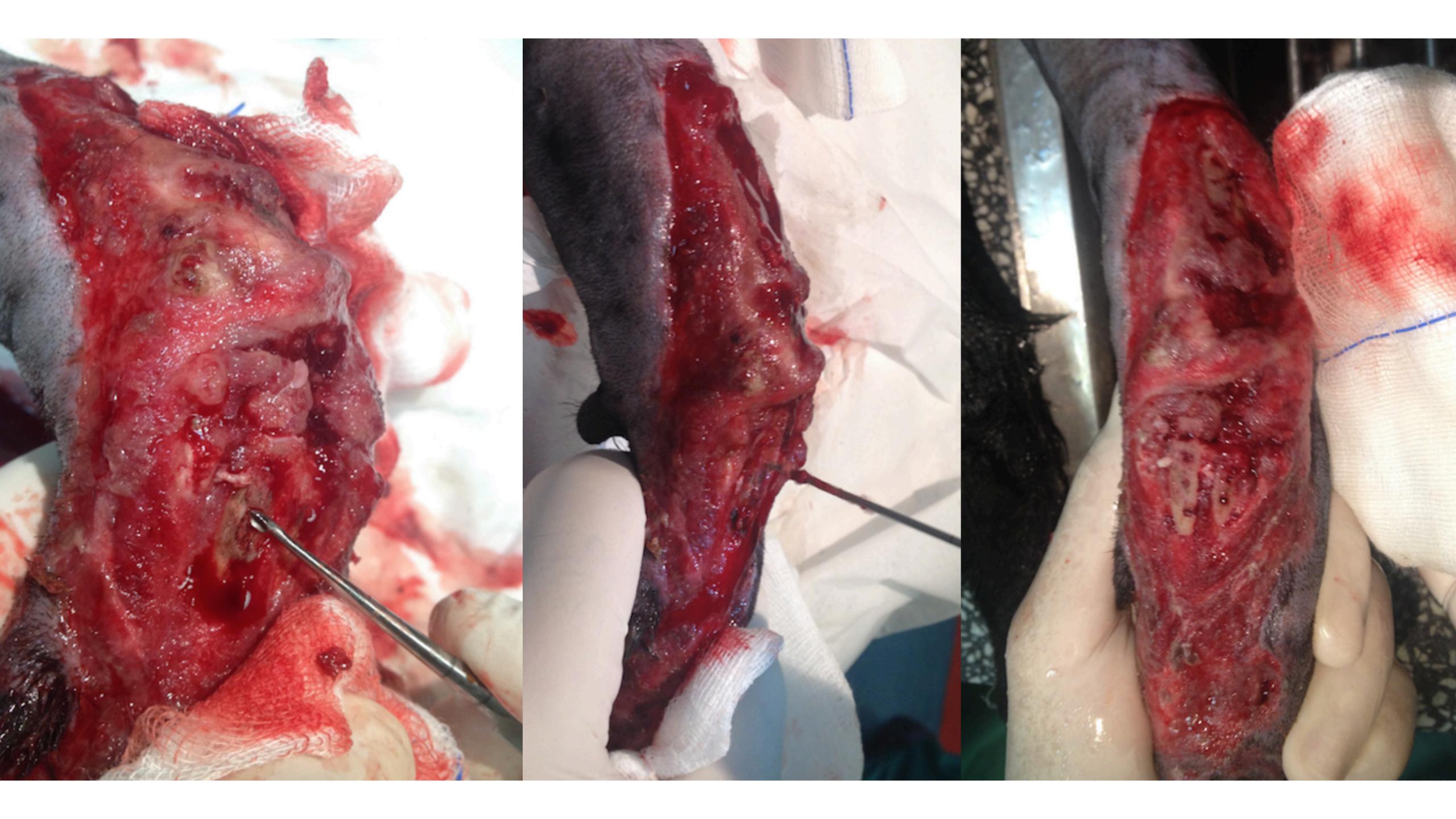


Case 2

Richi

6 m, mix, 16 kg Lost from home, found 4 days later Limb shearing injury





3 days f up



Sugar bandage



6 days f up

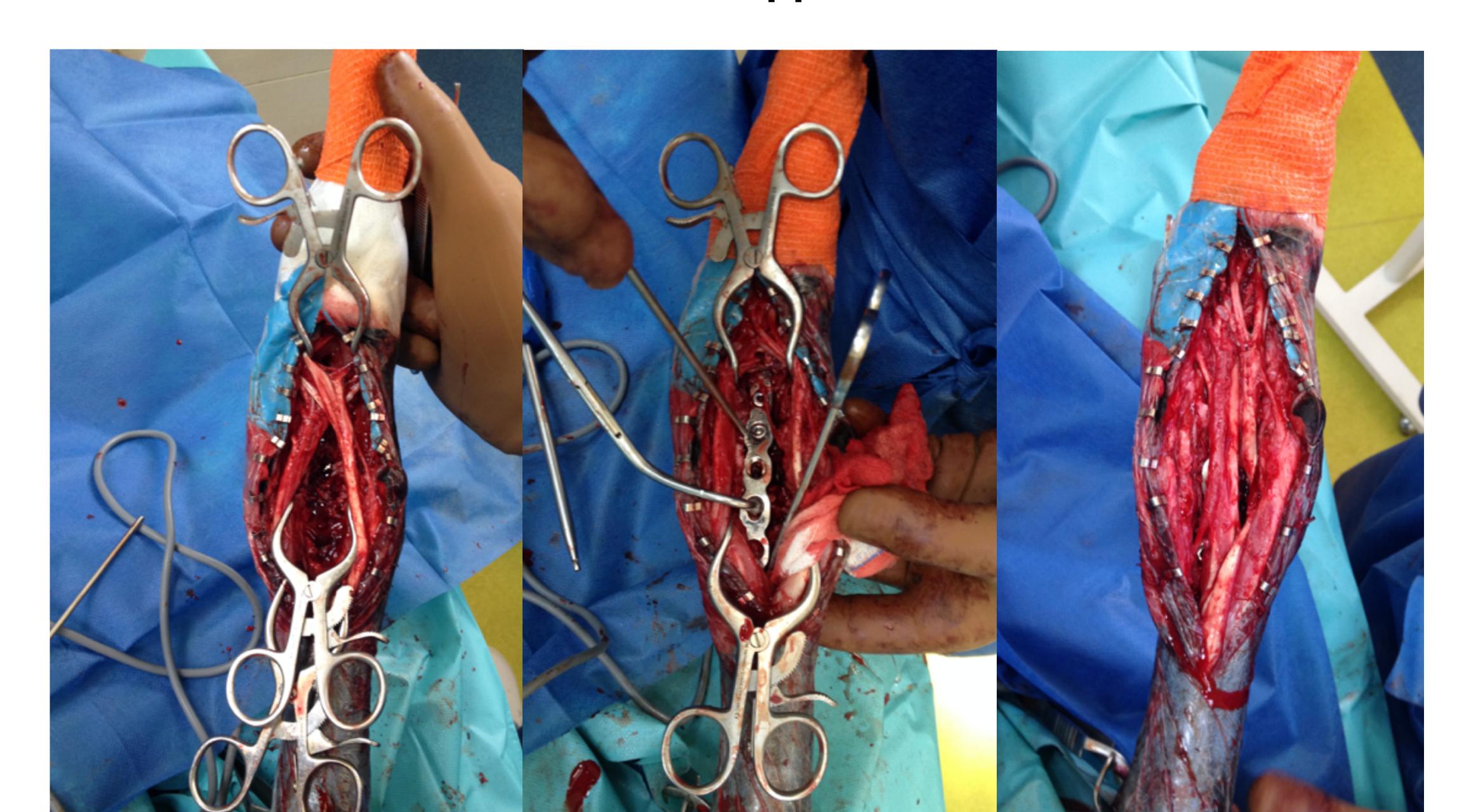
Gentamycin bandage





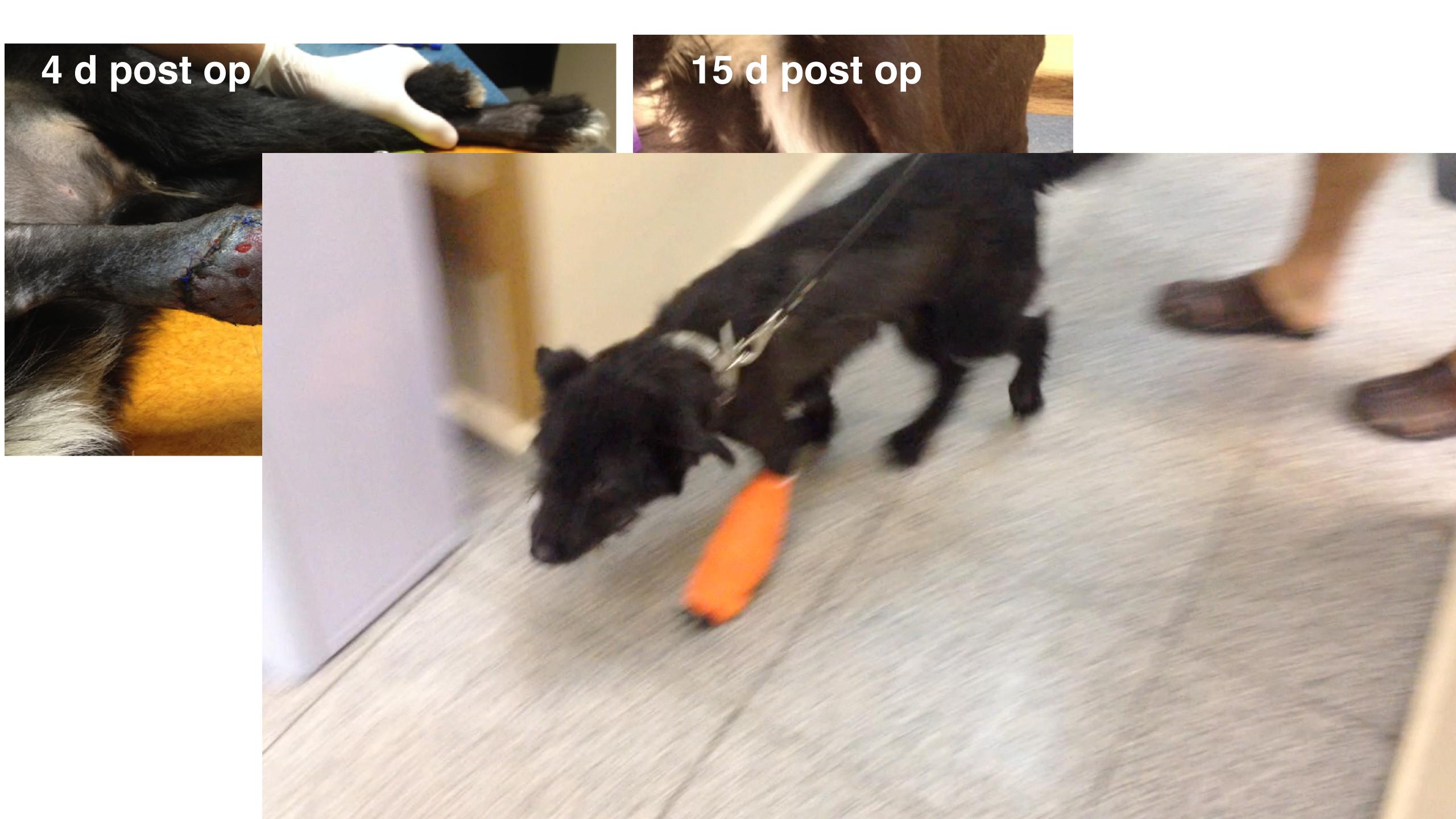


Palmar approach

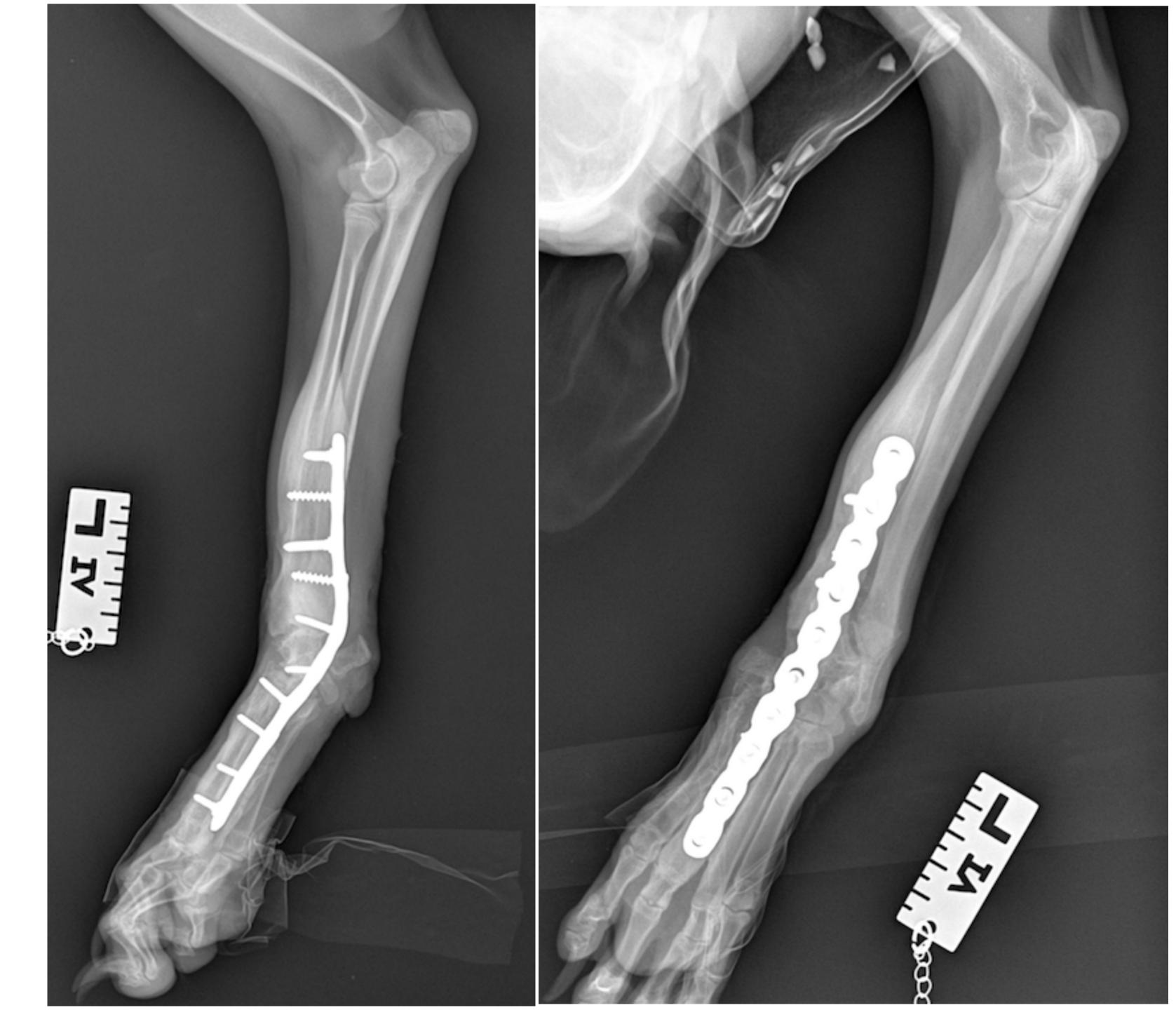












Myocutaneous Flaps

Skeletal muscle and the overlying skin.

 In humans- blood to the skin through musculocutaneous arteries exiting <u>the muscle</u> <u>surface.</u>

In dogs and cats- direct cutaneous arteries.

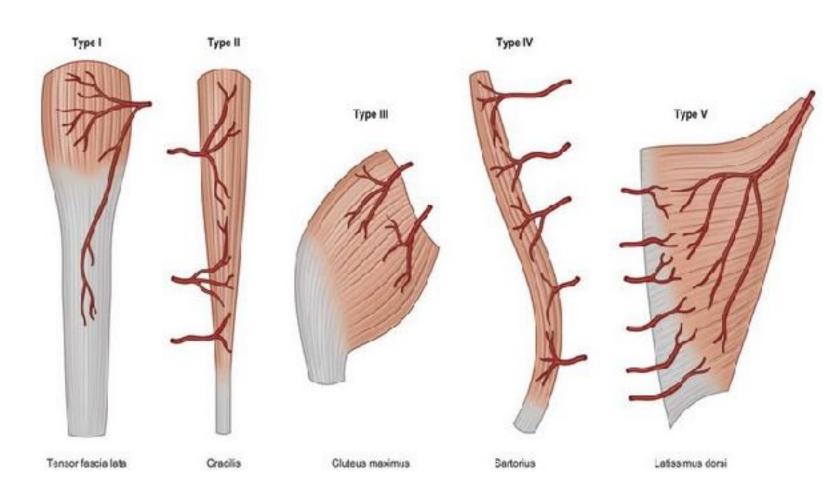


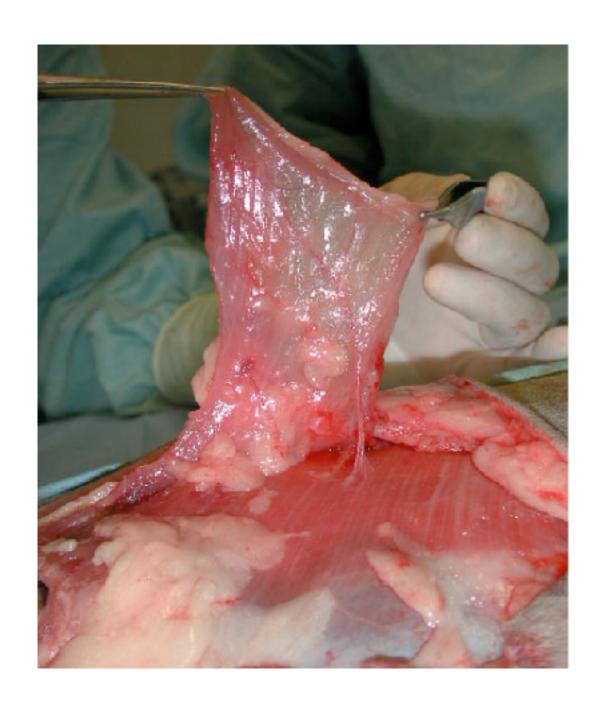
Muscles Flaps

• Individual skeletal muscles to repair body defects, mostly body walls.

Contributing additional circulation

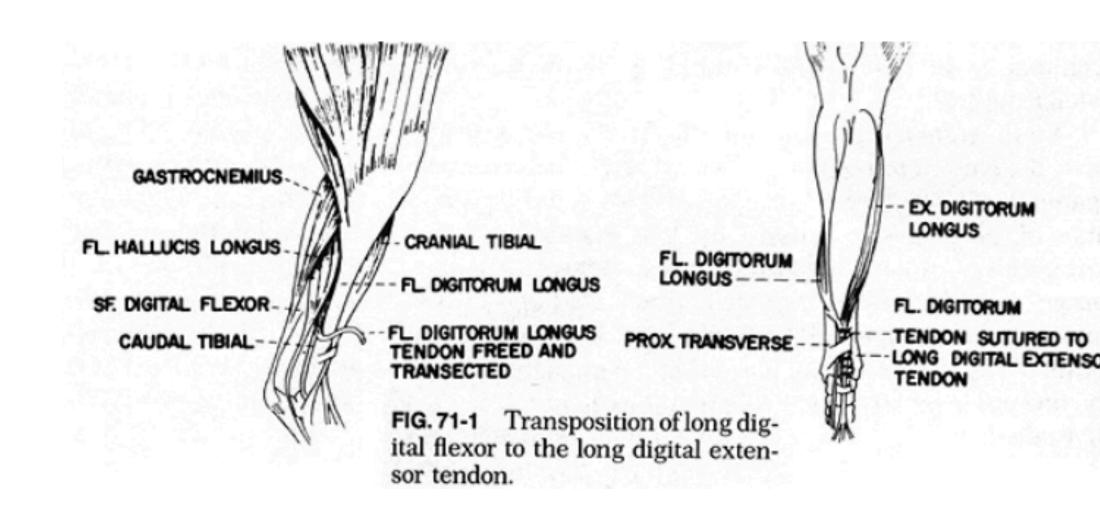
Limited clinical application?!

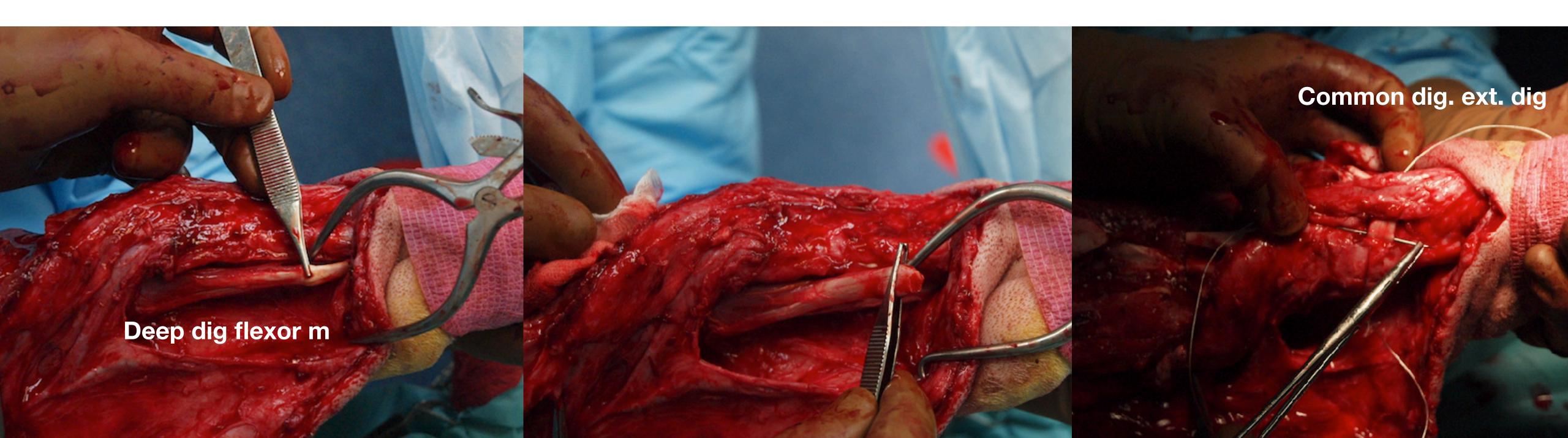




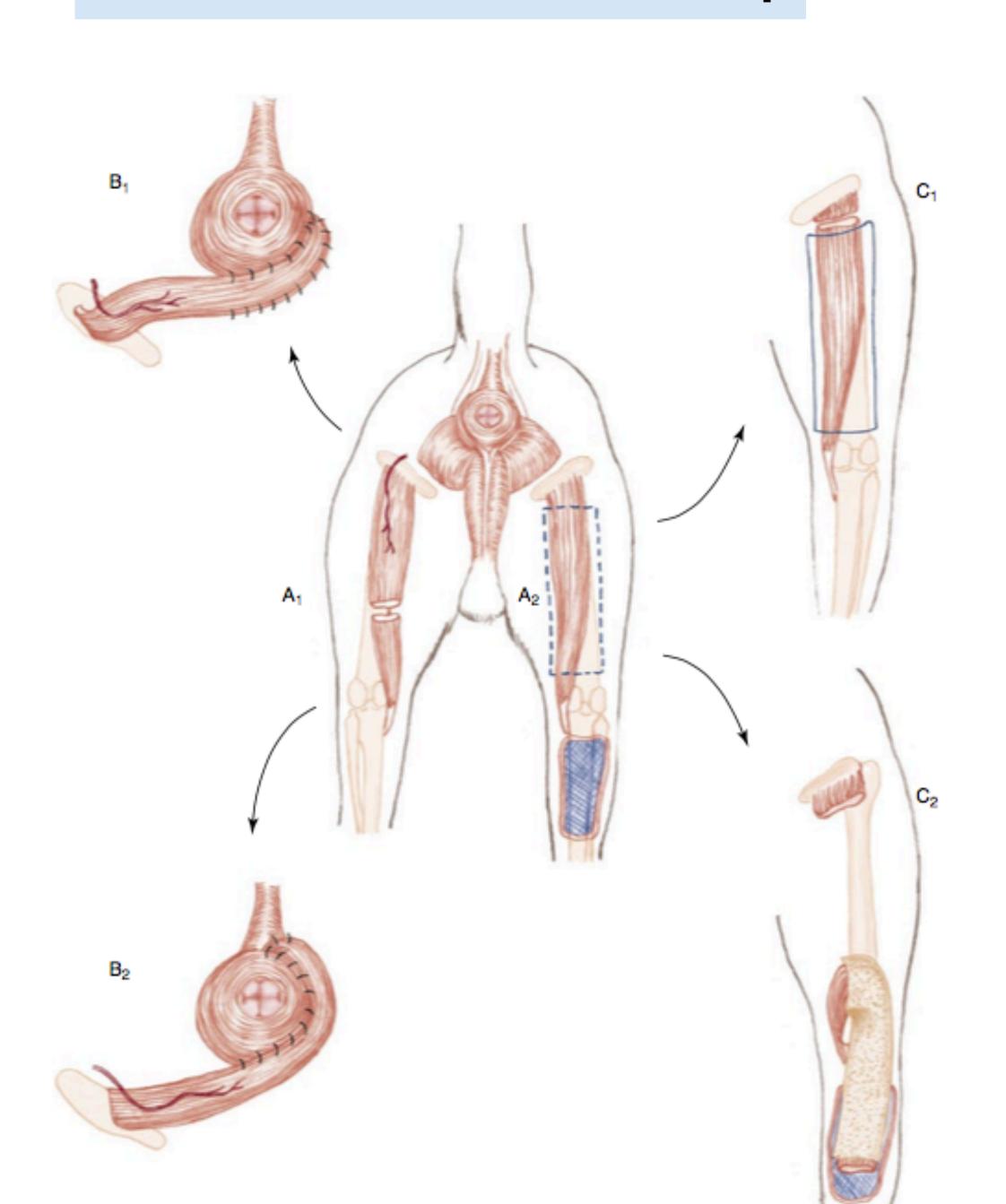
Muscle- tendon transposition

Palliative for paralysis- radial nerve and peroneal nerve.

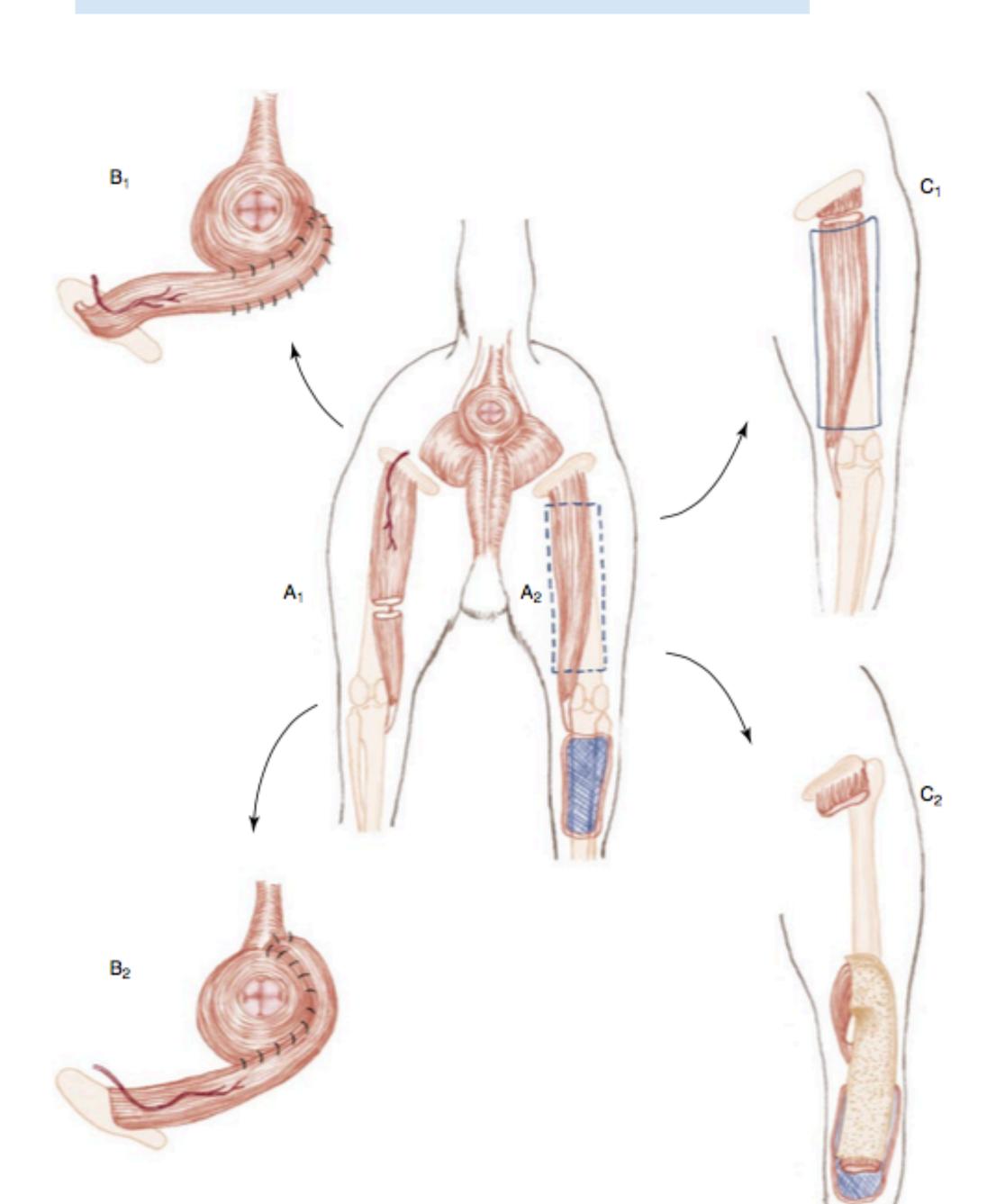


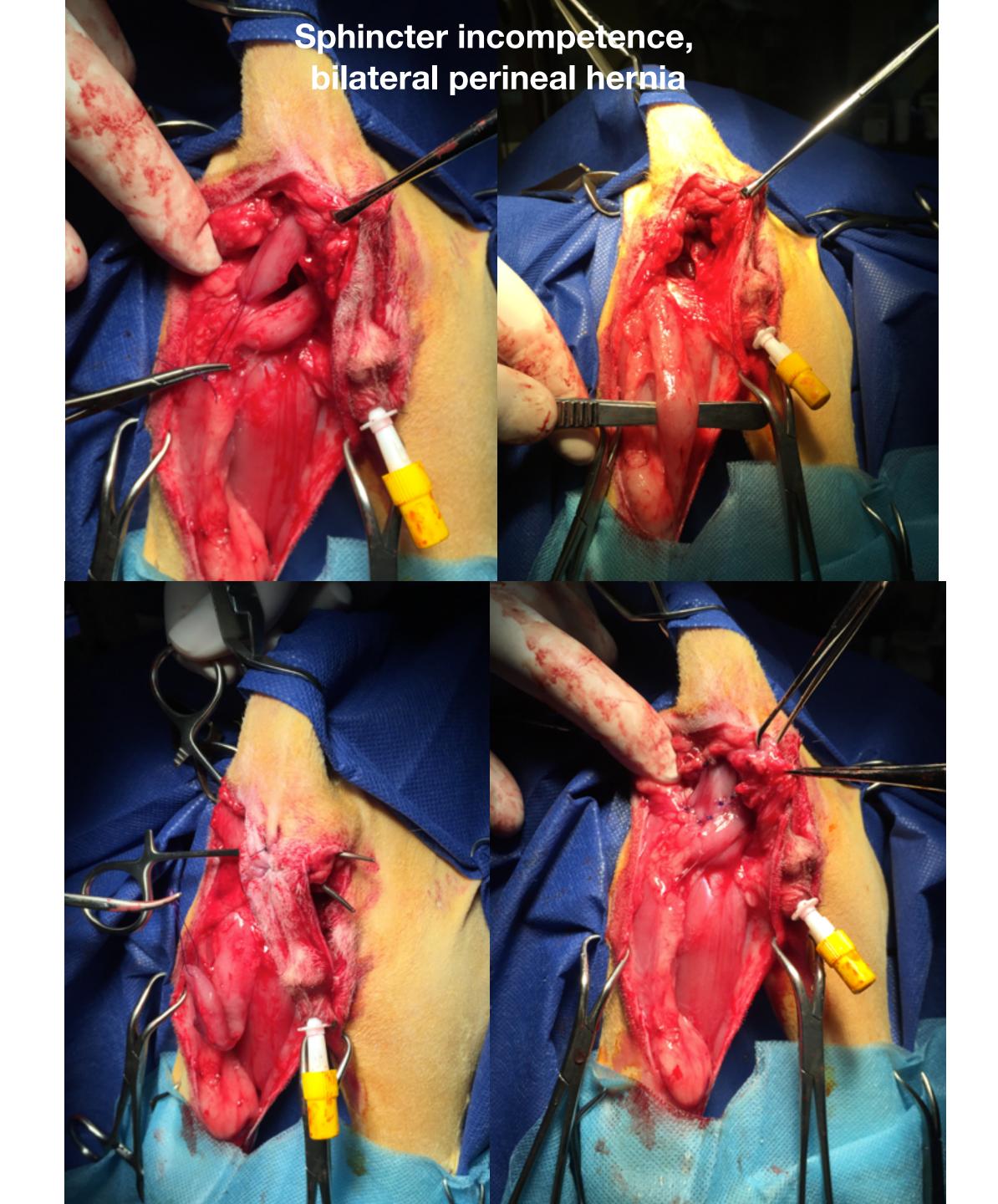


Semitendinosus Muscle Flap



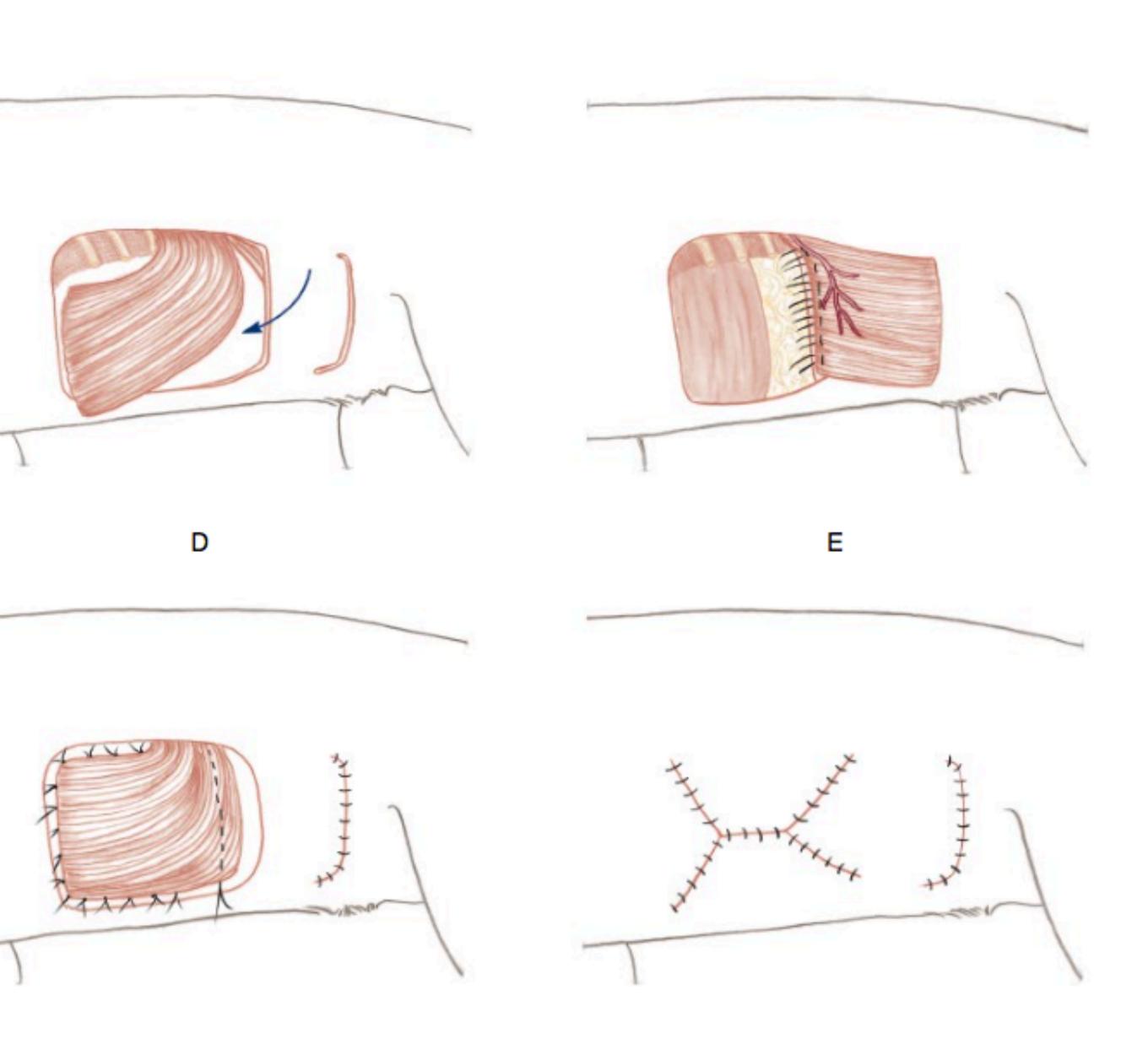
Semitendinosus Muscle Flap

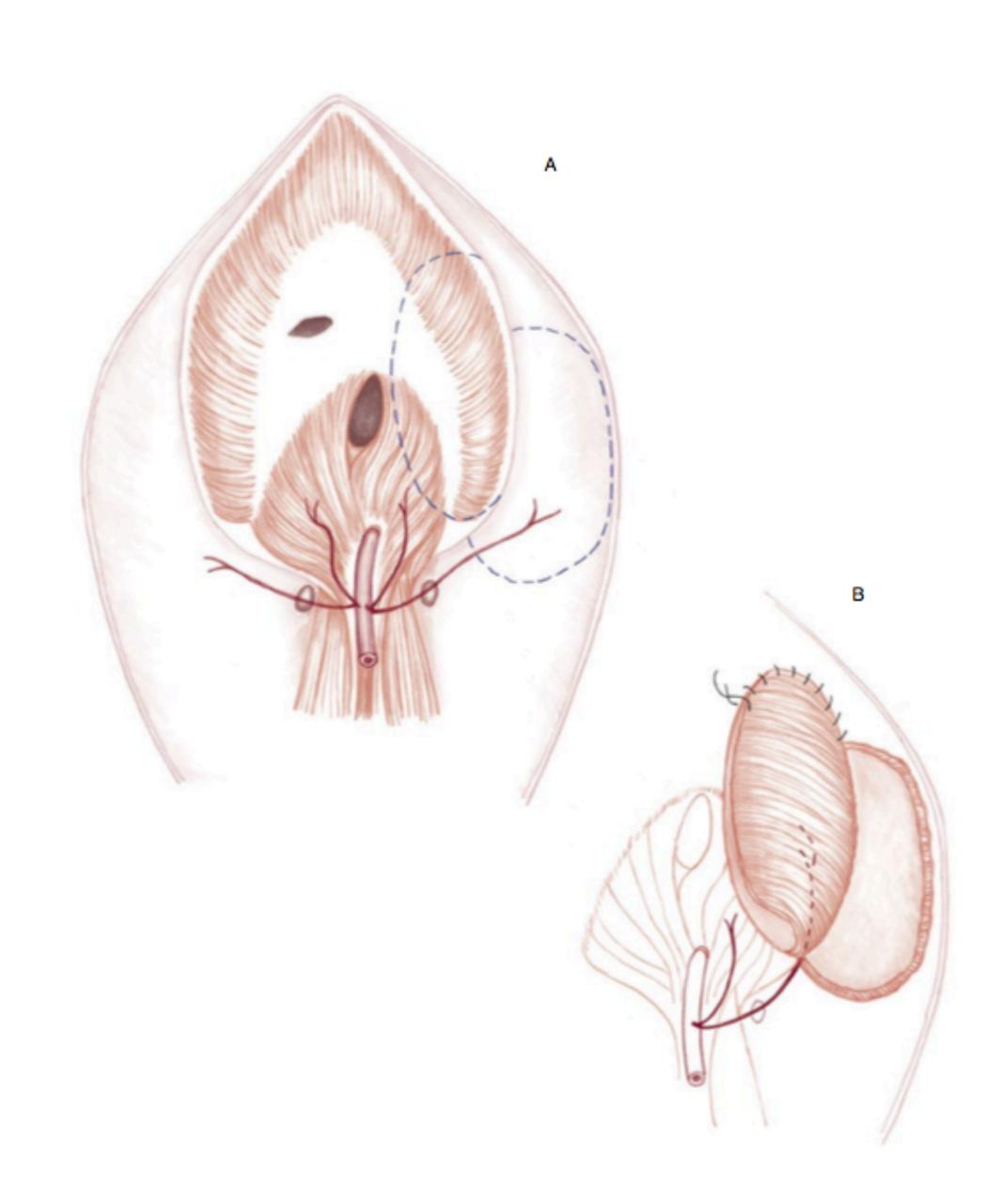




External Abdominal Oblique Muscle Flap

Transversus Abdominis Muscle Flap





Thoracic and abdominal wall reconstruction

- Small defects- combination of <u>muscle advancement</u> and transposition.
- Large defects- reconstruction by <u>synthetic meshes.</u>
- Extensive defects (i.e. more than 5 or 6 ribs)- mechanically resistant reconstruction.

Case 3

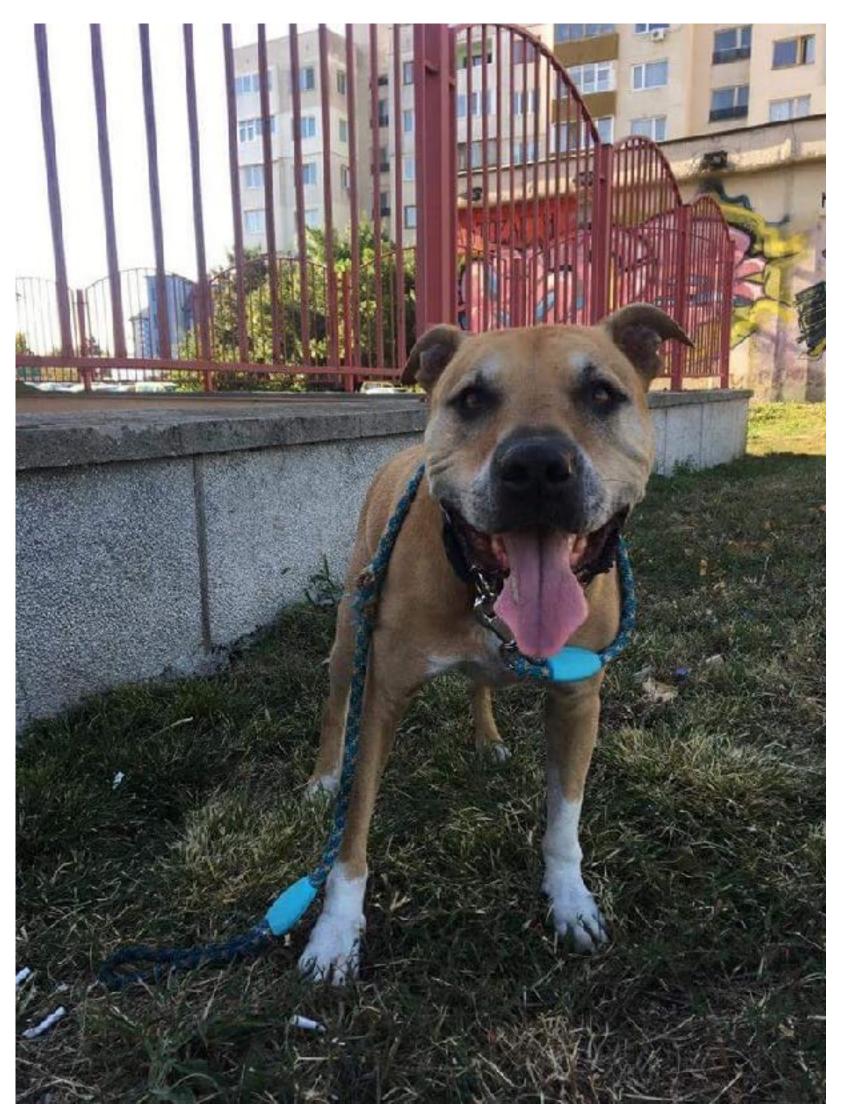
Mars

10 y old, male pit bull

Front right leg lameness

Lump on the right chest

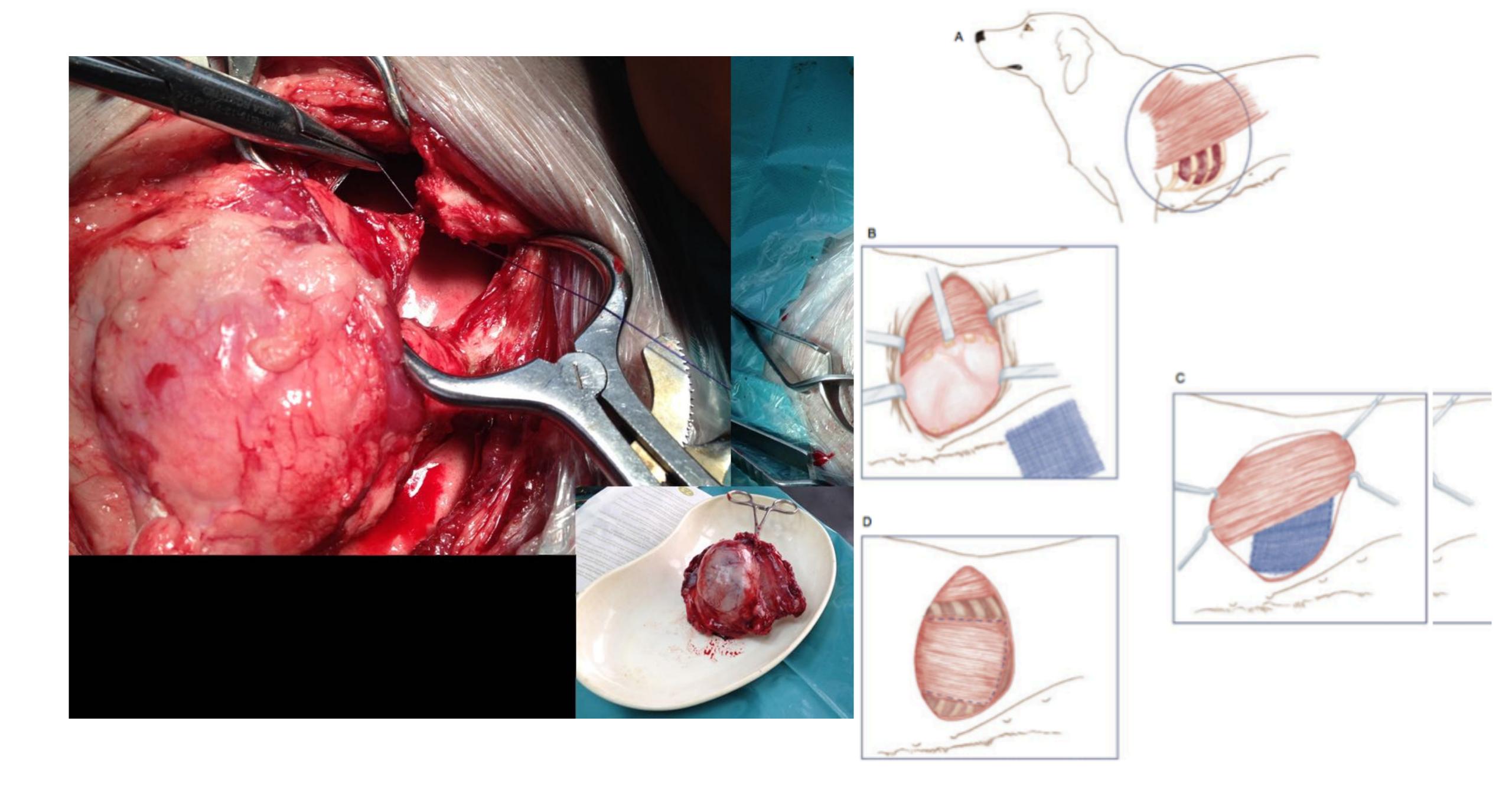


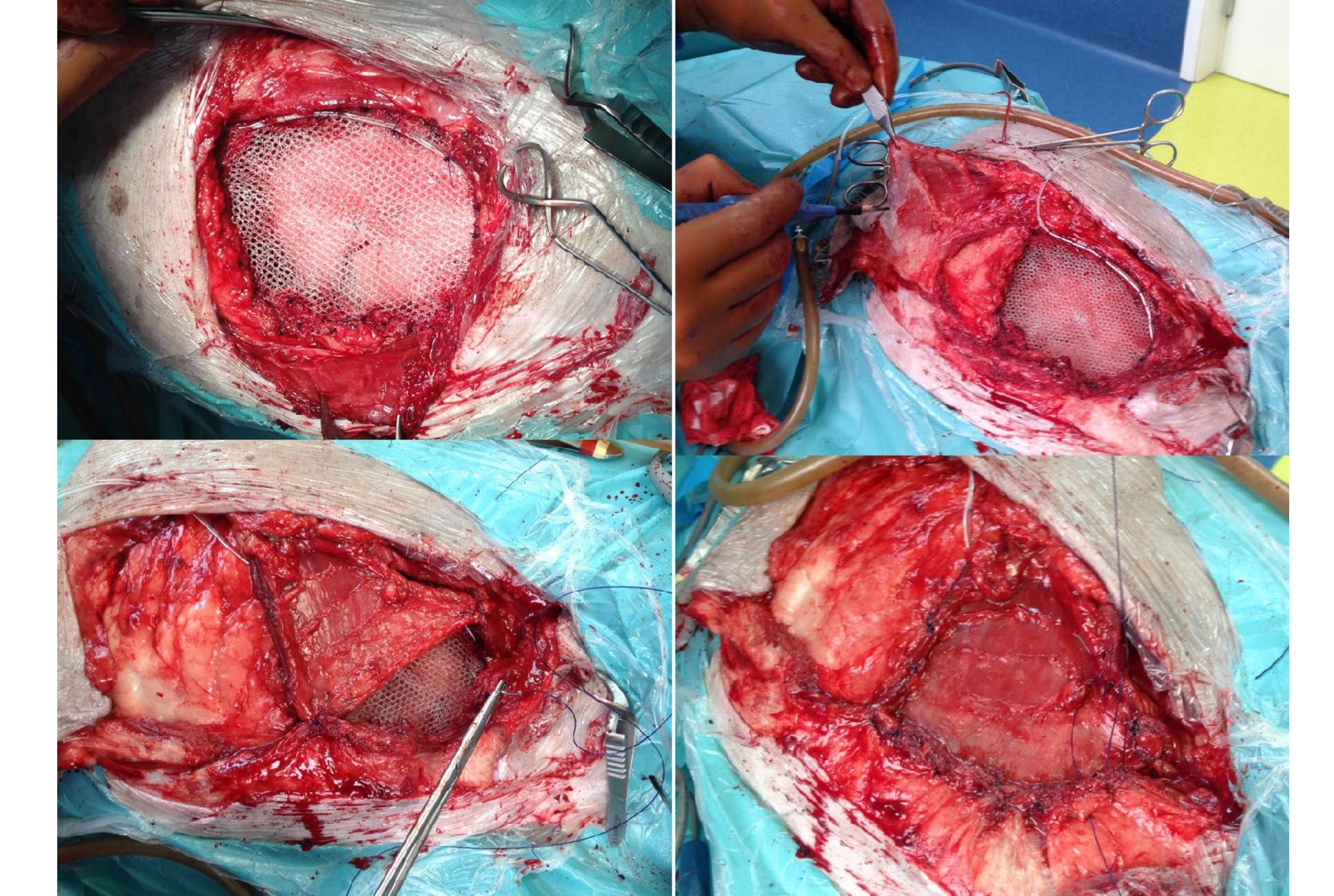






Latissimus Dorsi Myocutaneous Flap









1 d f up



3 d f up







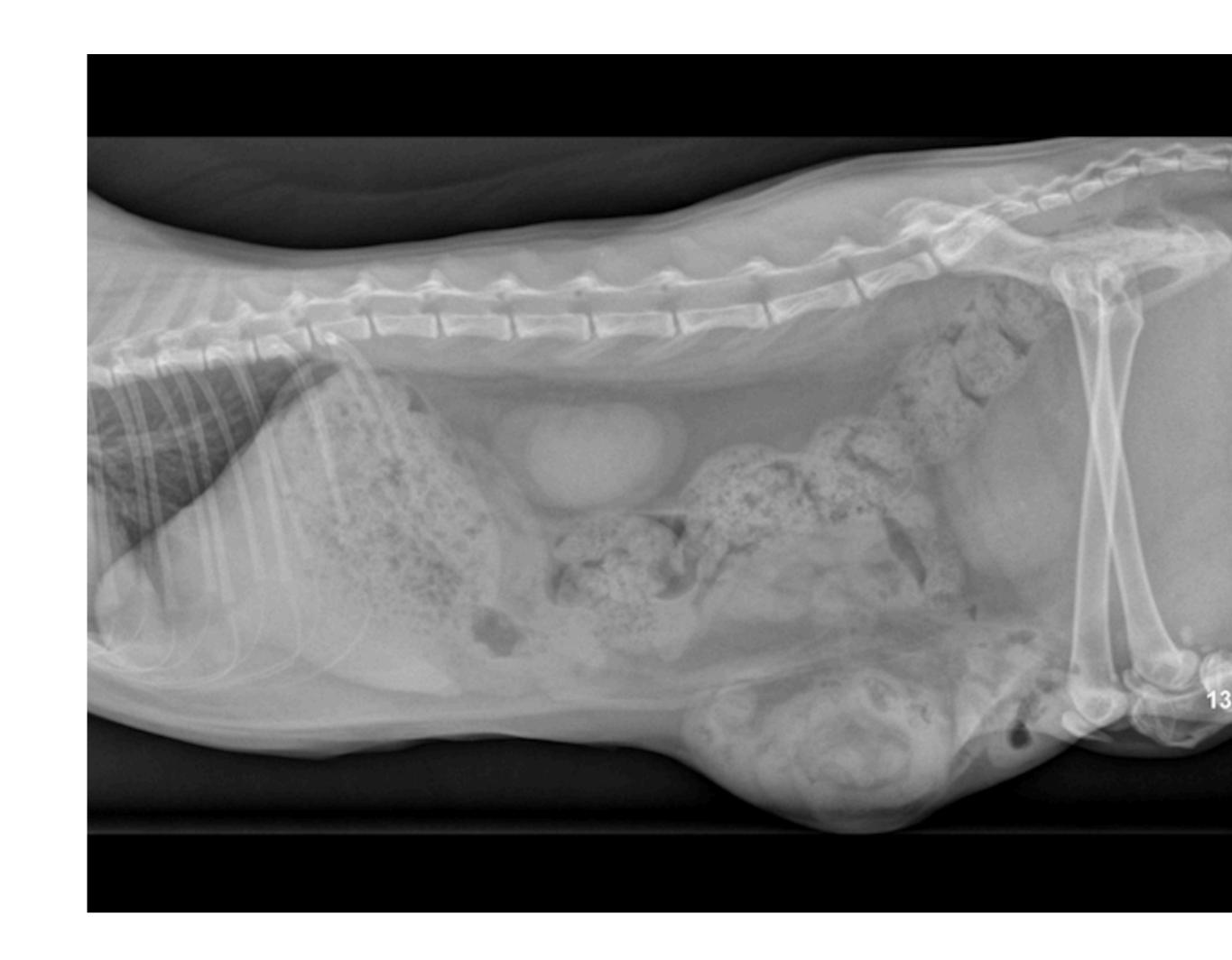


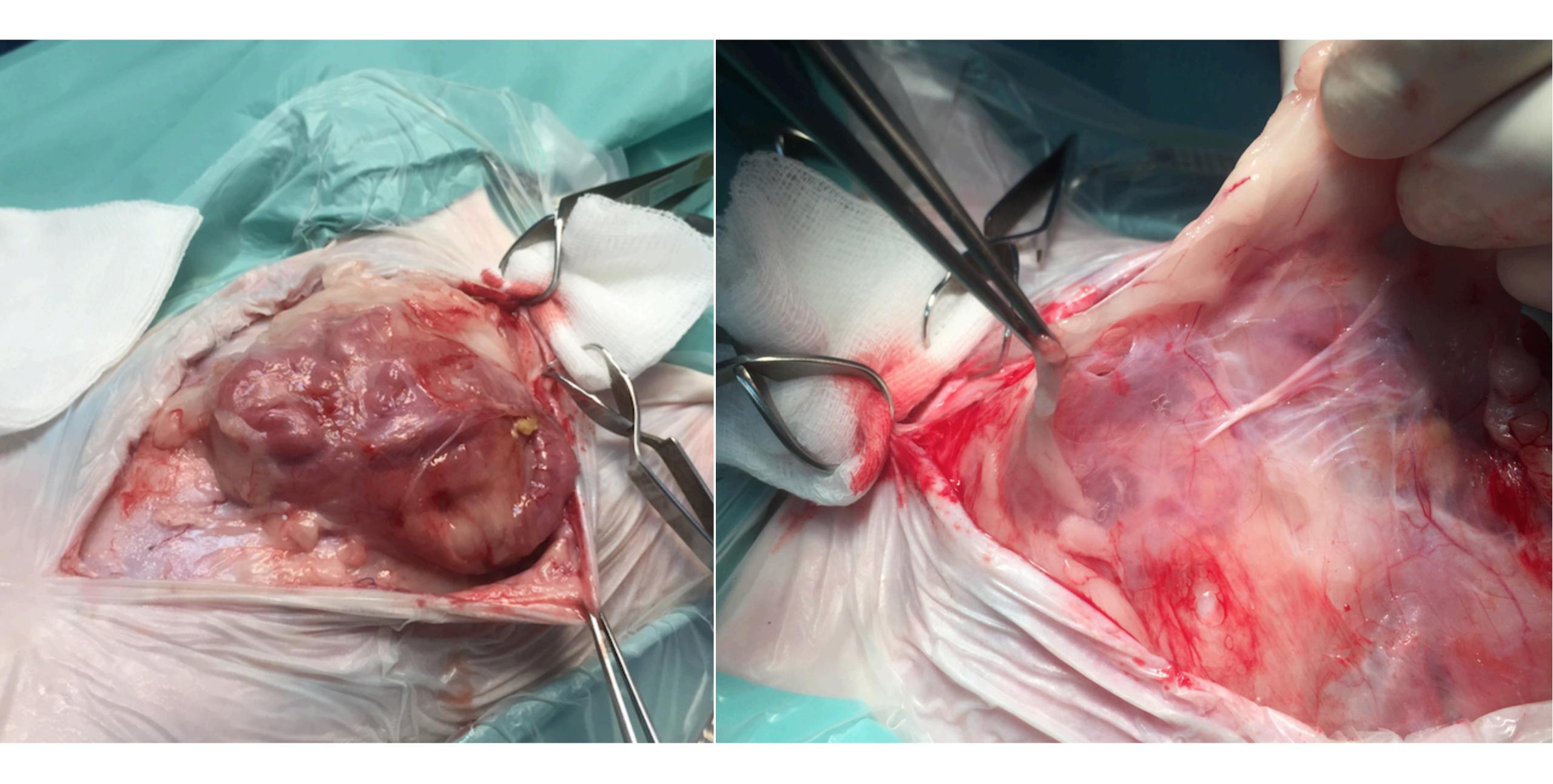
Madita

1 y old, ESH, female

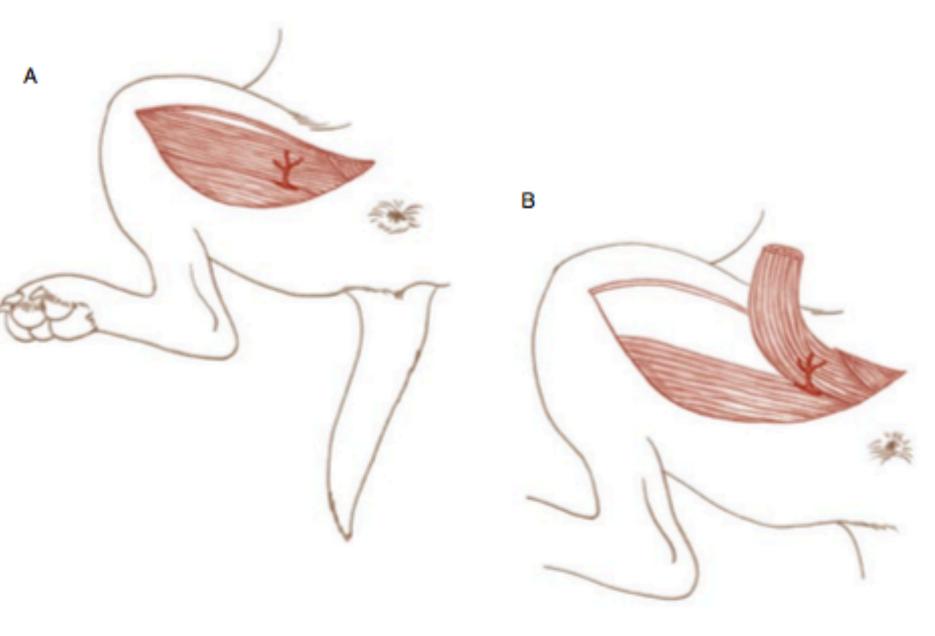
Eventration of unknown origin

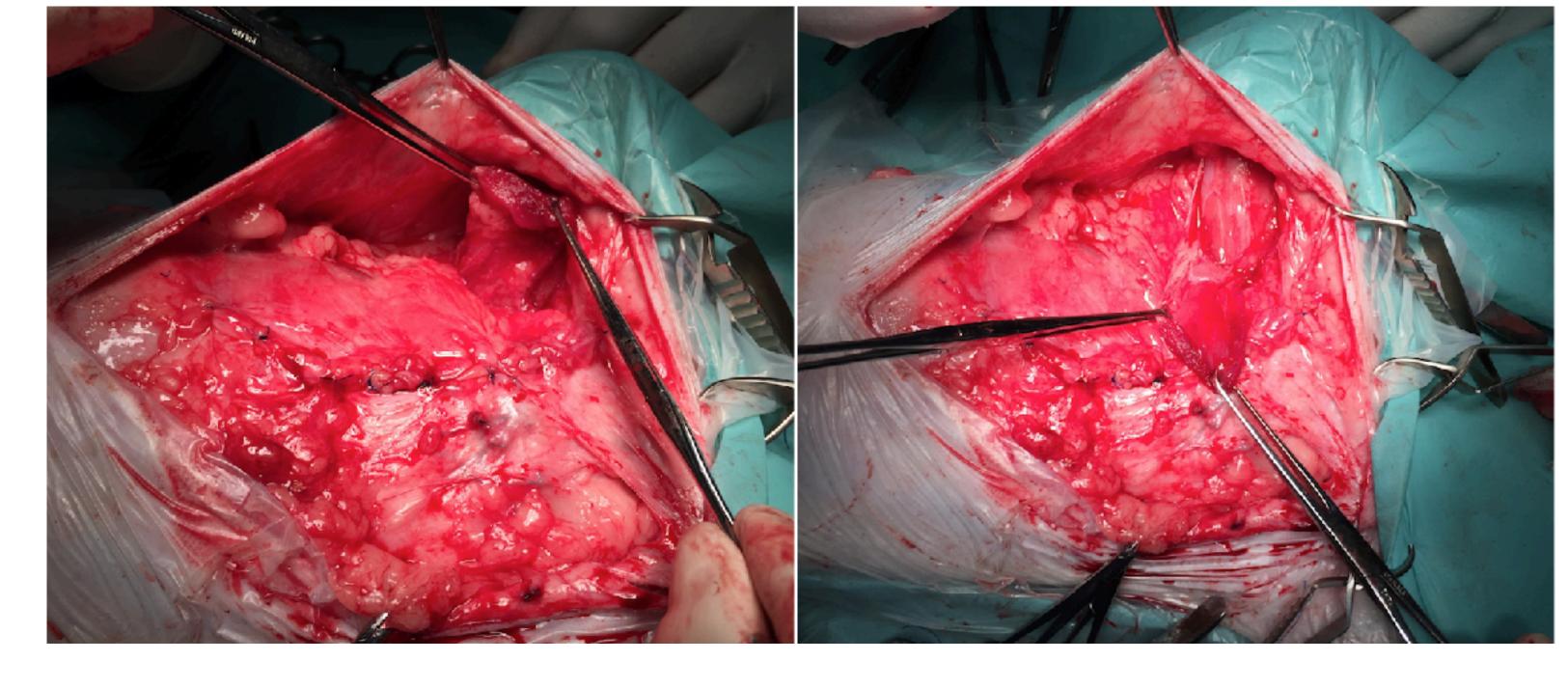
3 previous reconstructions

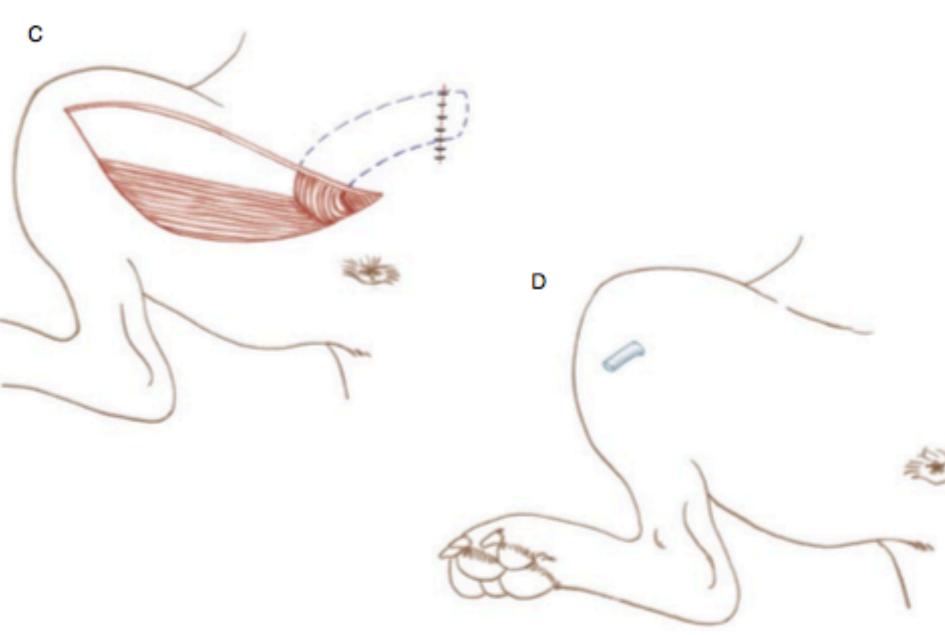


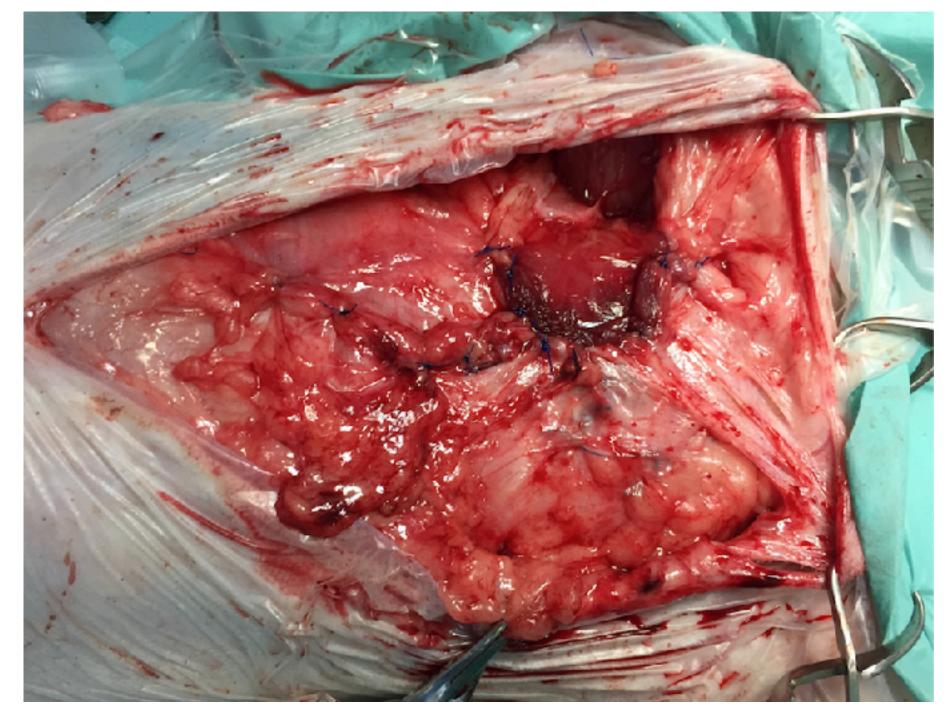


Cranial Sartorius Muscle Flap

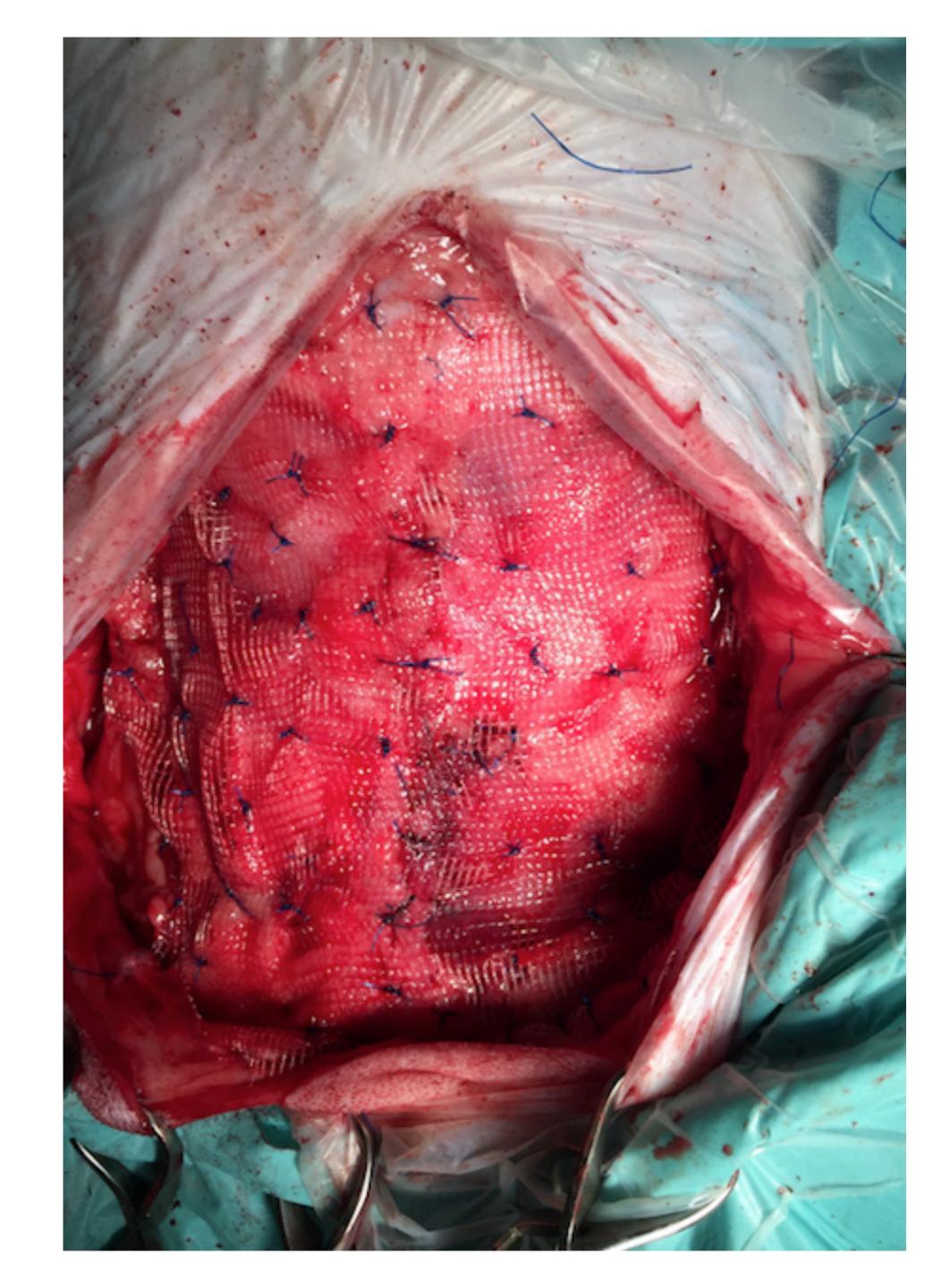






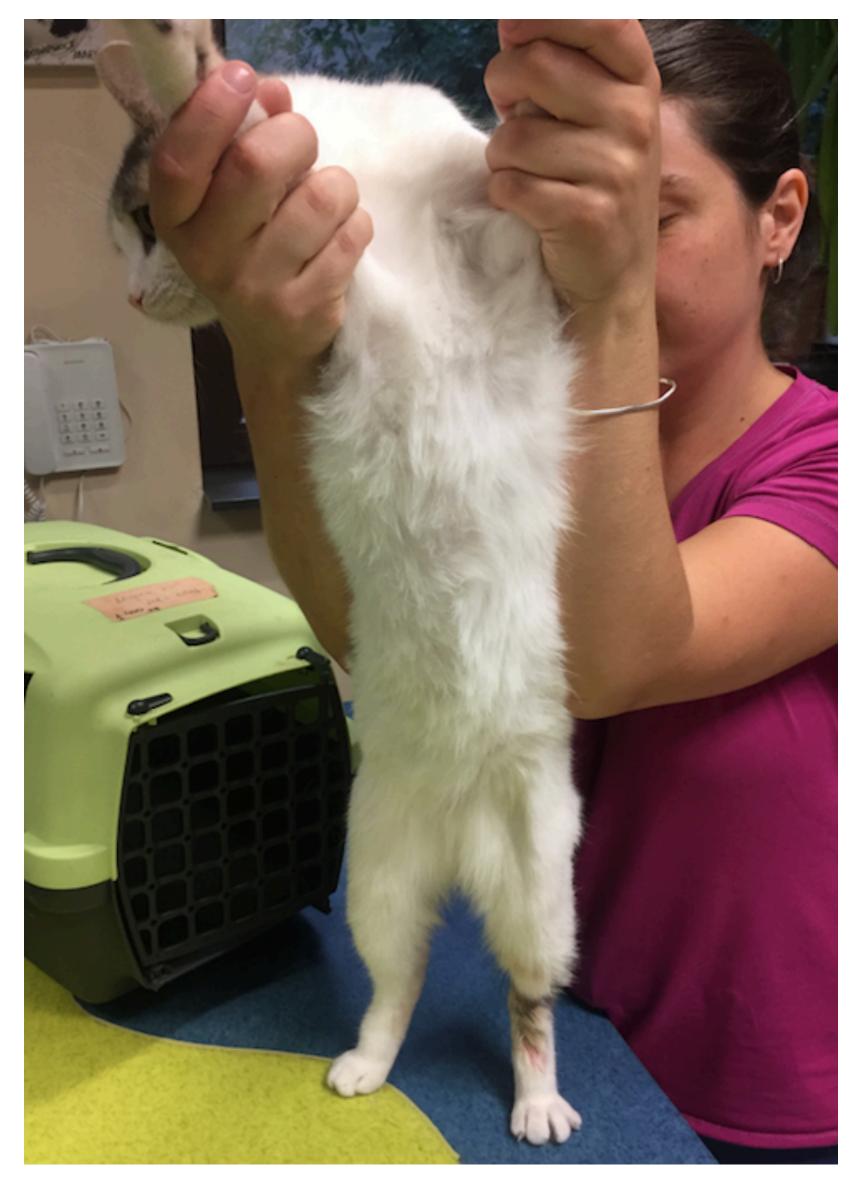


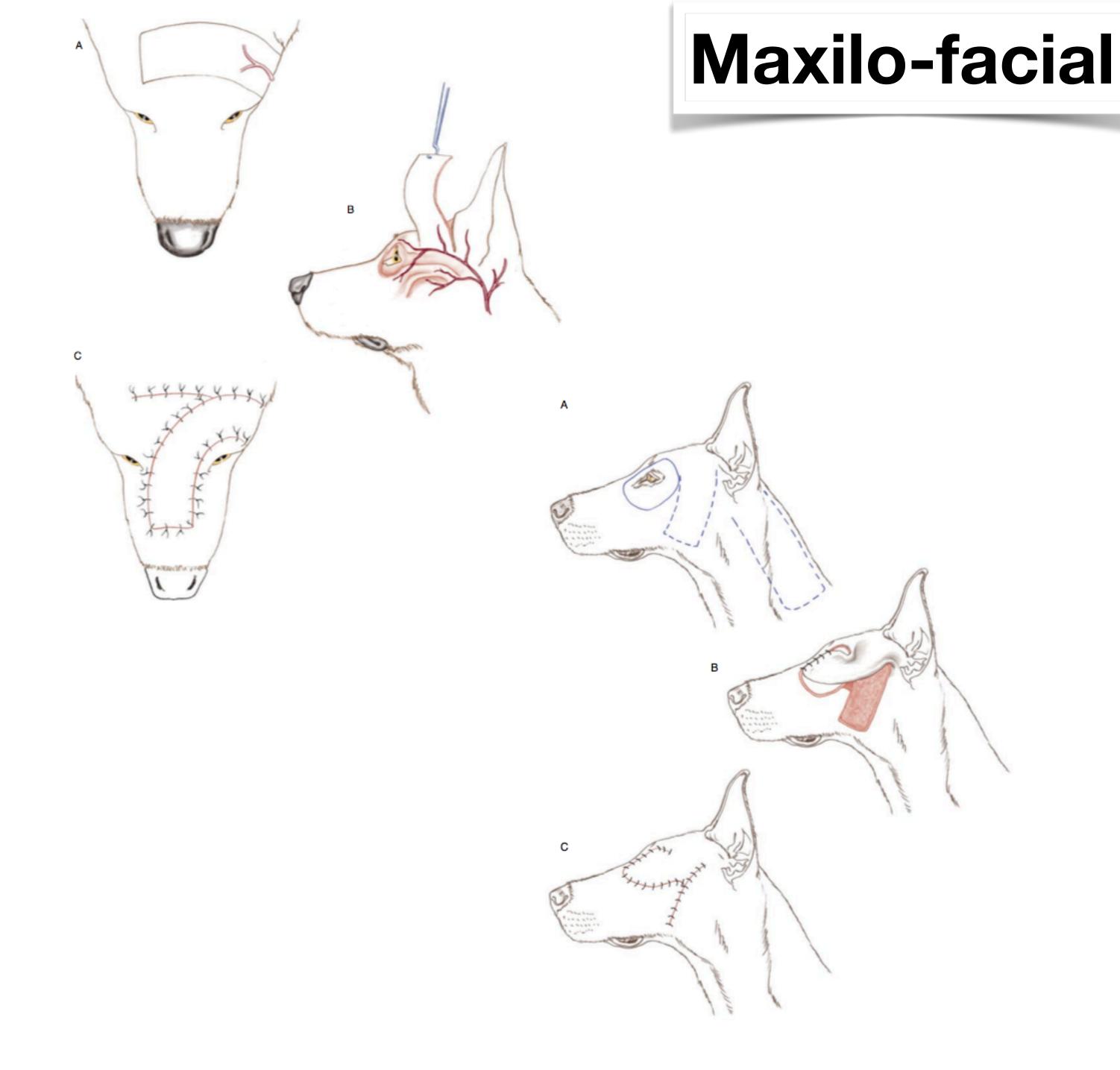


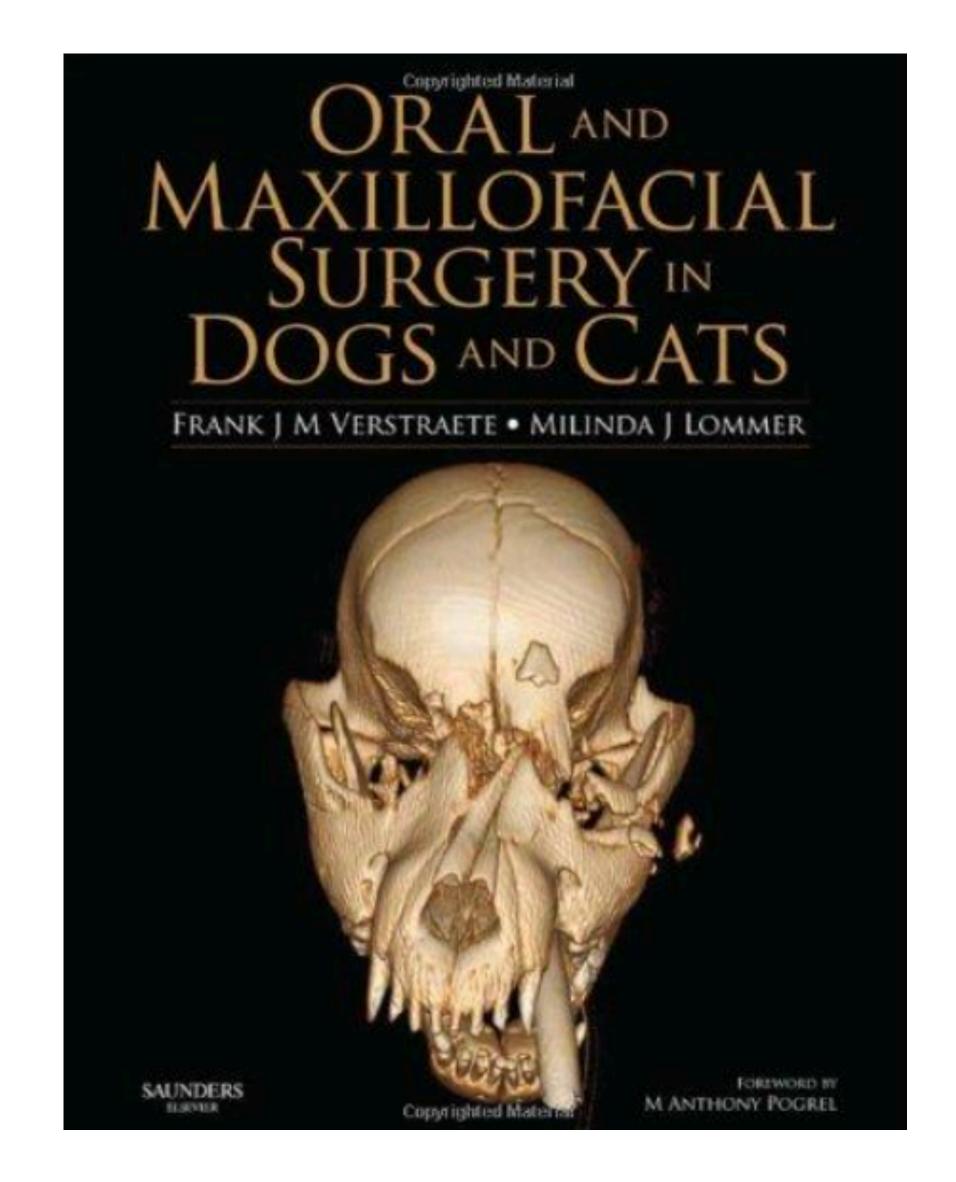




4 m f up







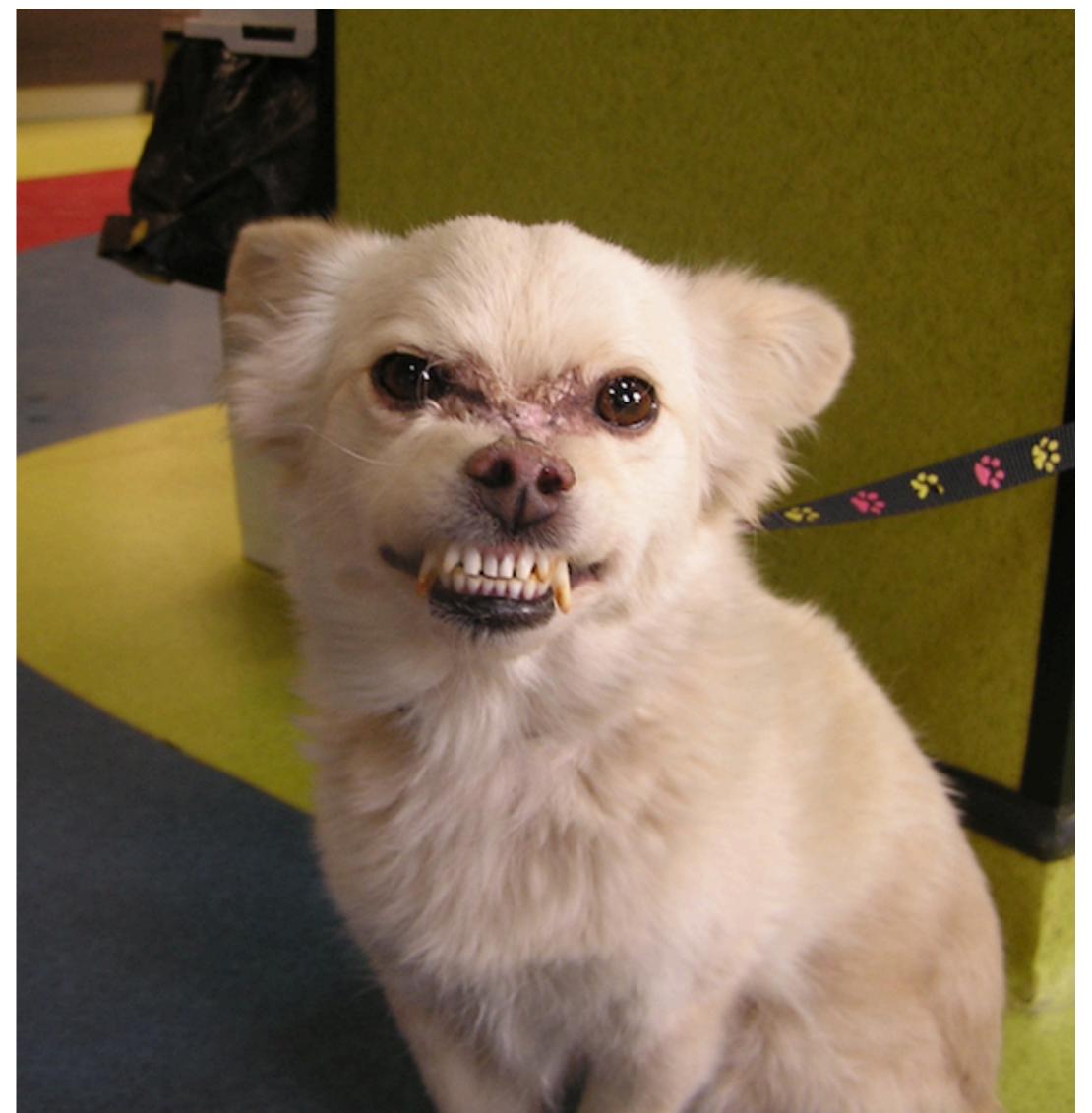
Draga

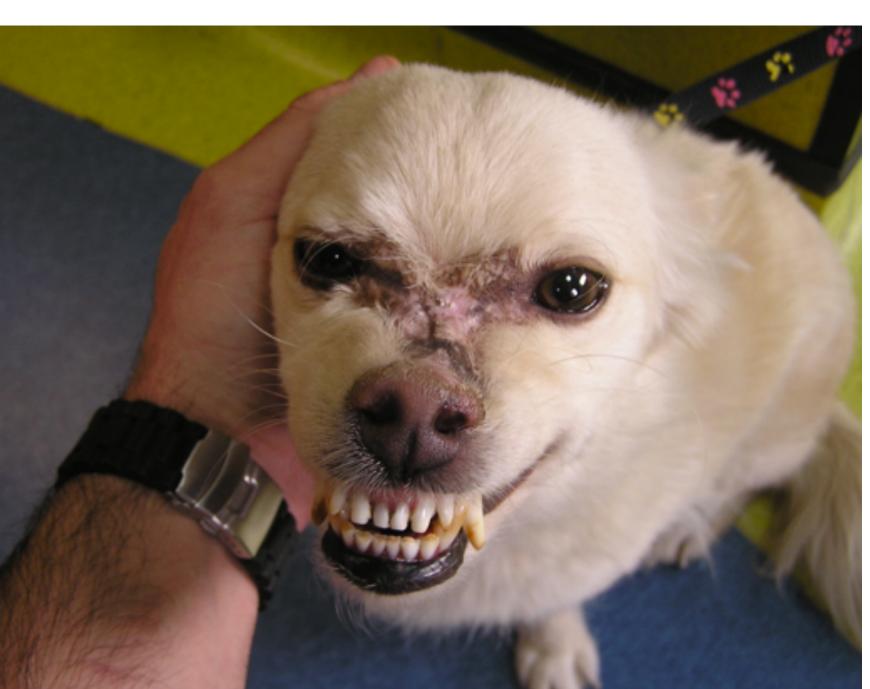
6 y old, mix, female, 5 kg

Aesthetic issues

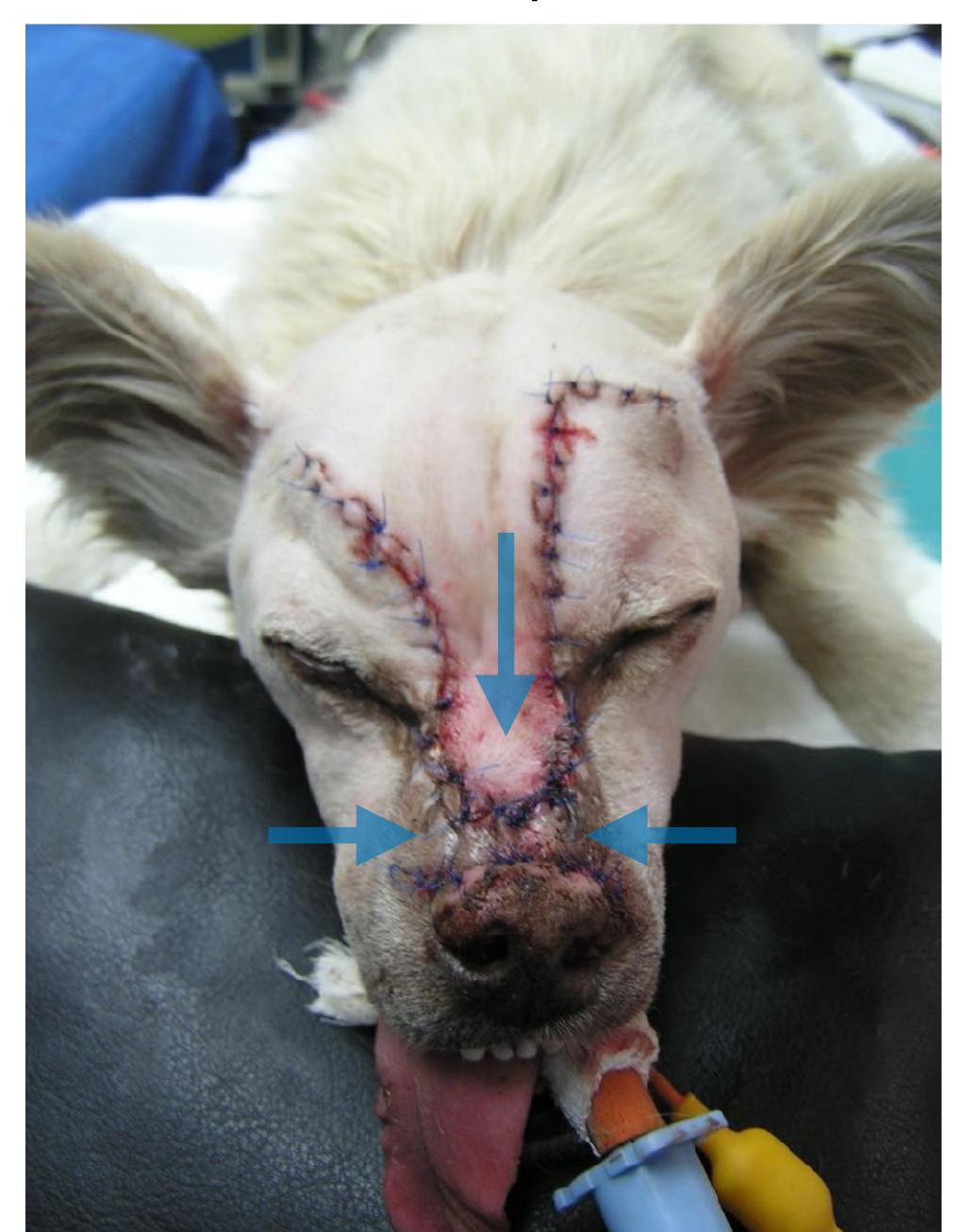


Severe dorsal nasal skin cicatrix contracture





Post op



14 days f up



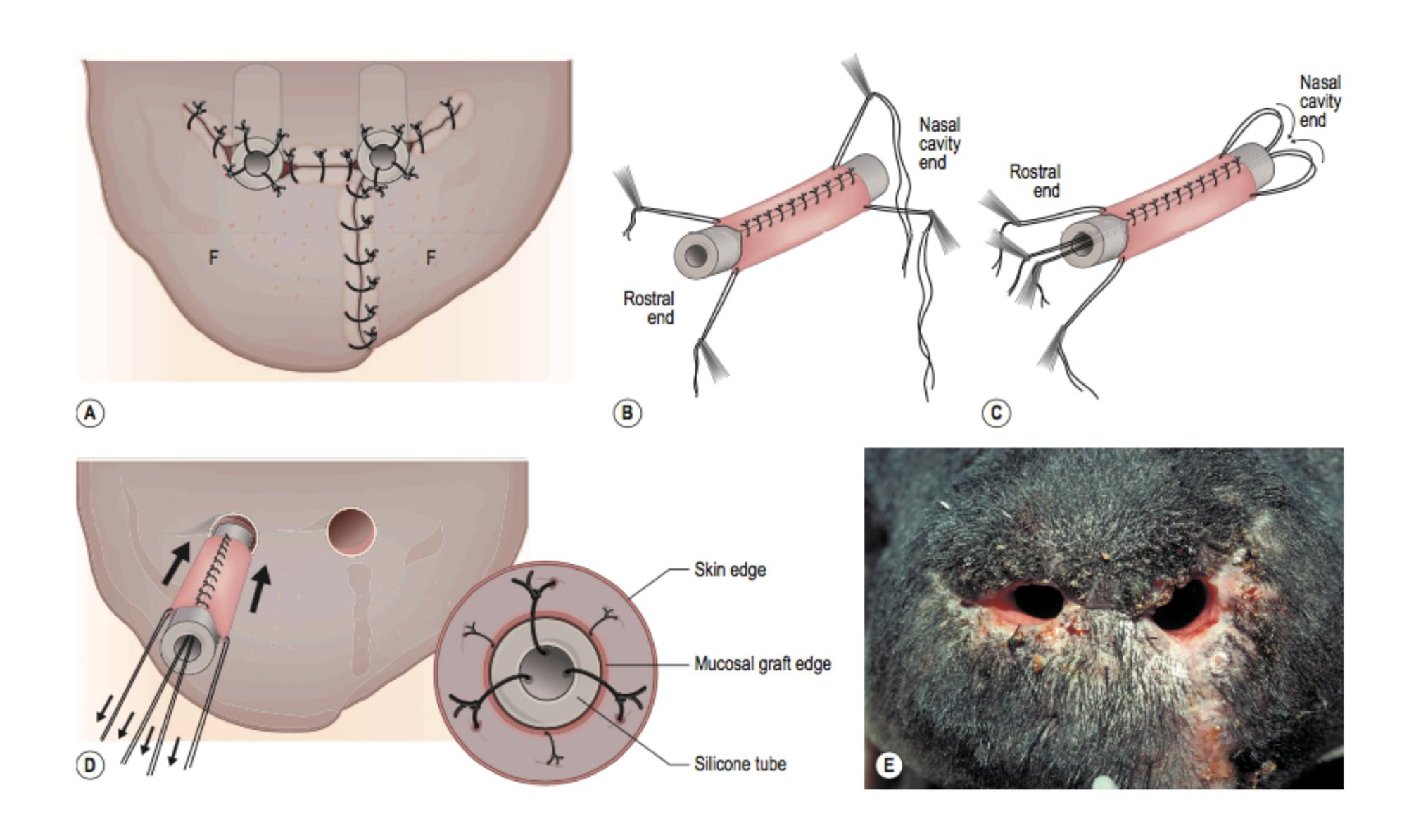


Tipo

- 5 y old, mix, male
- Nostrils bitten off by leopard, one year ago.
- 3 previous surgeries



Oral Mucosal Graft with Nasal Stenting

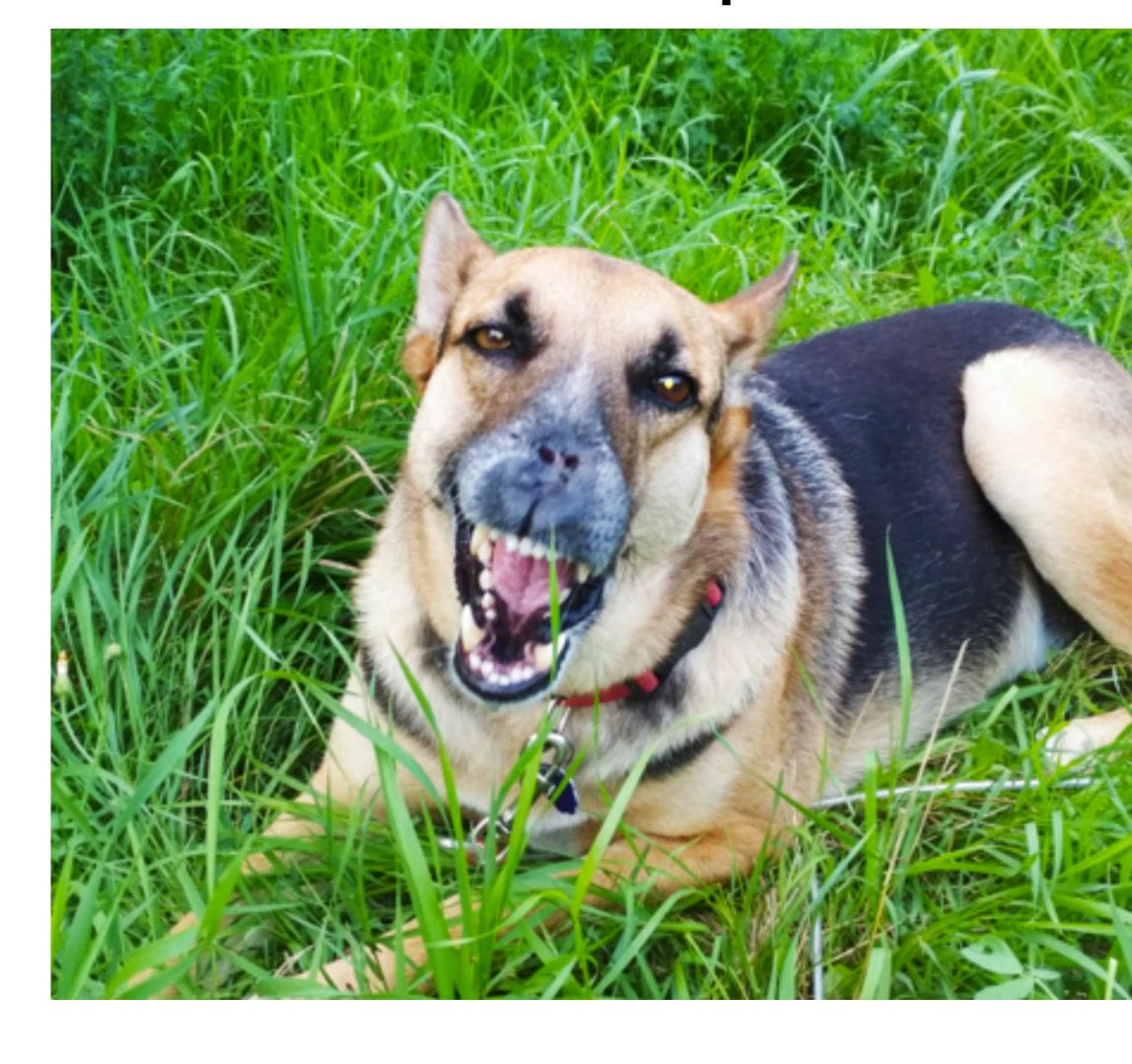




6 weeks f up



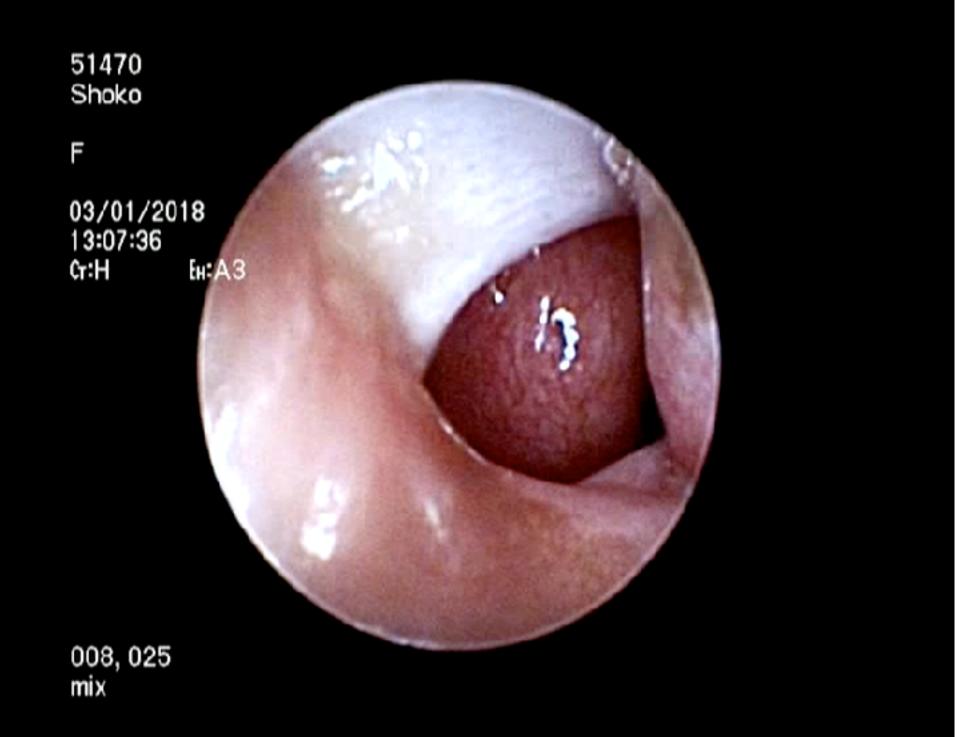
6 months f up

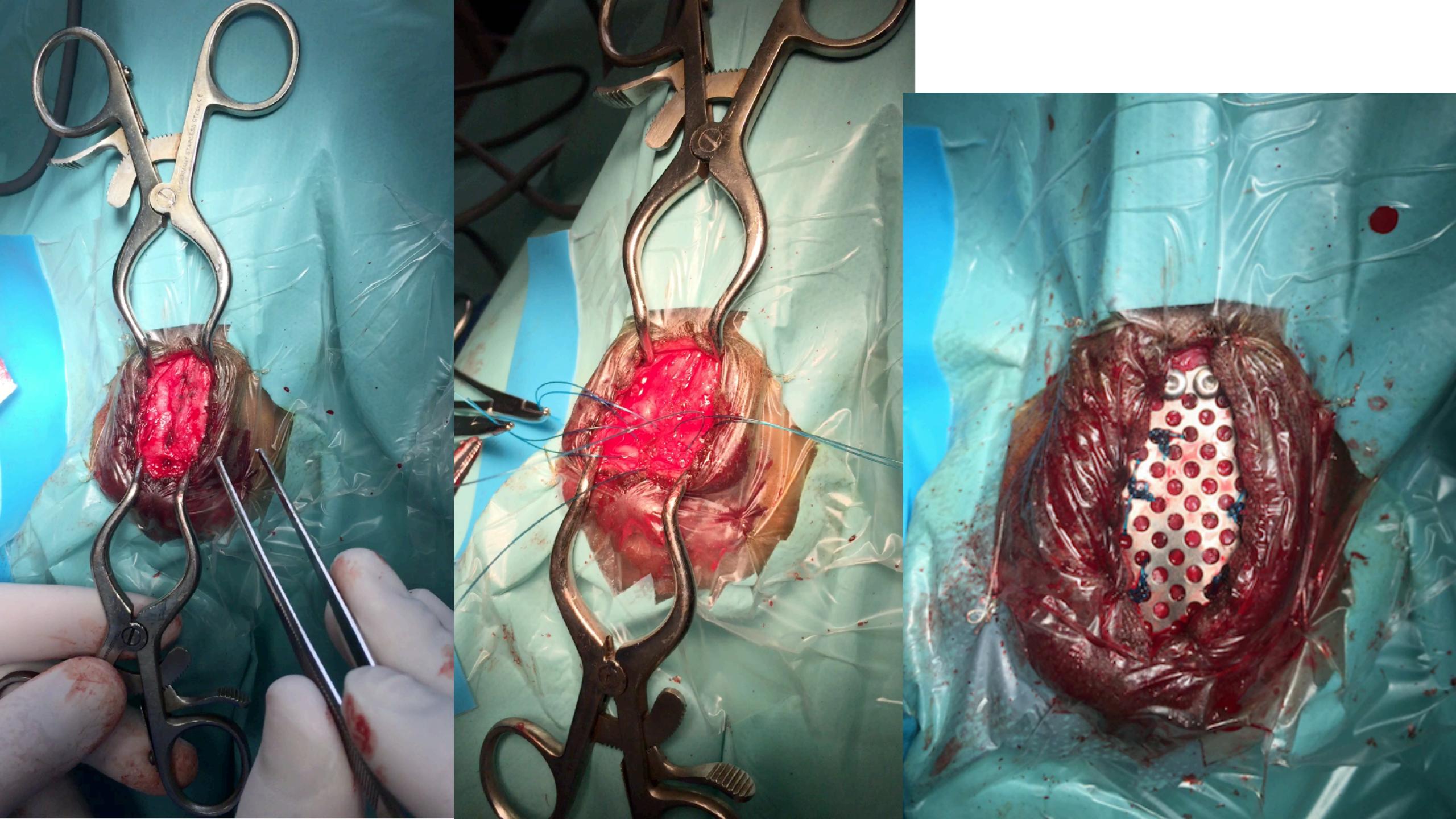


Shoko

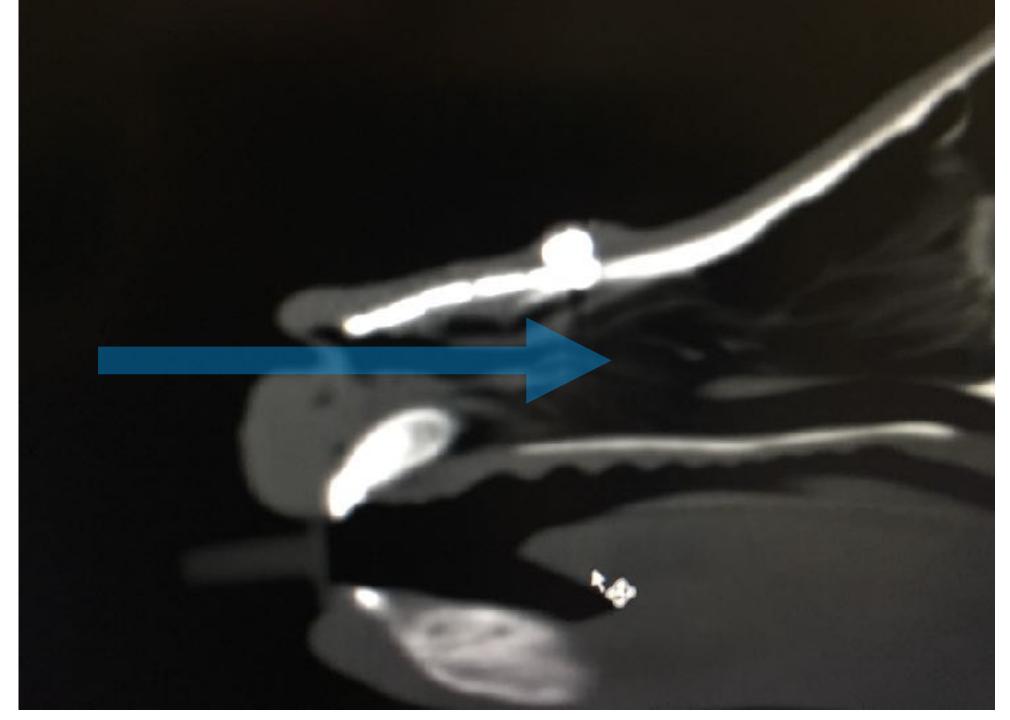
- 7m old, mix, female
- Difficult breathing, inspiratory effort
- Congenital alar cartilage defect



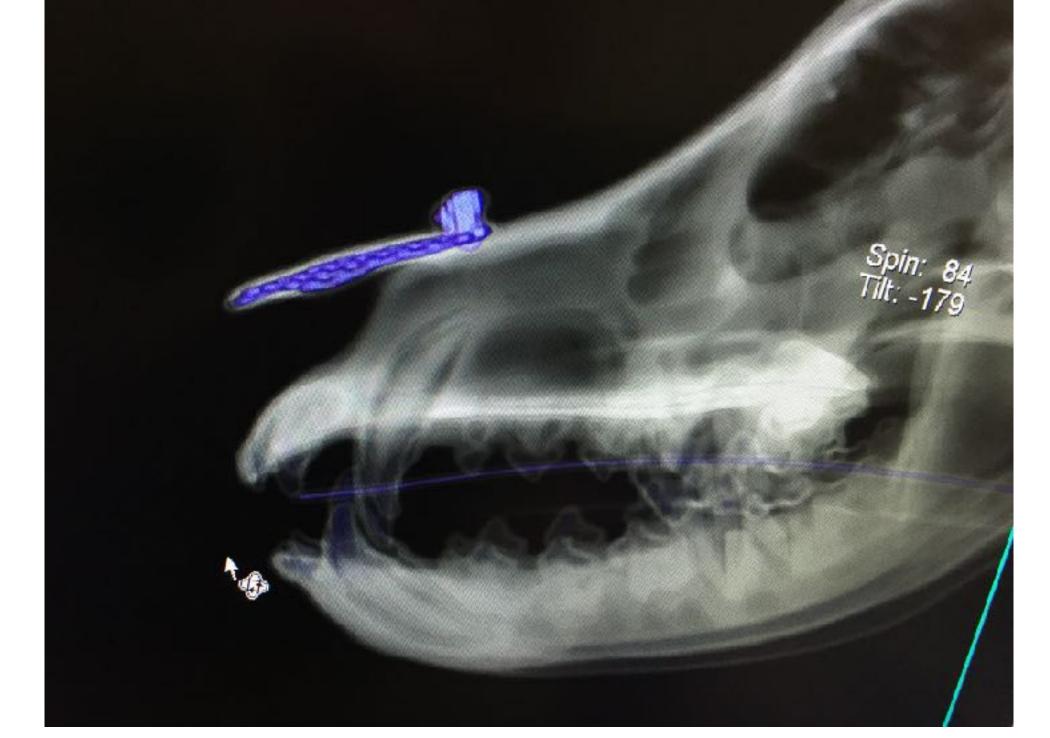














Winnie

- 1y old, female mix, 23 kg
- Found on the street- severe head trauma







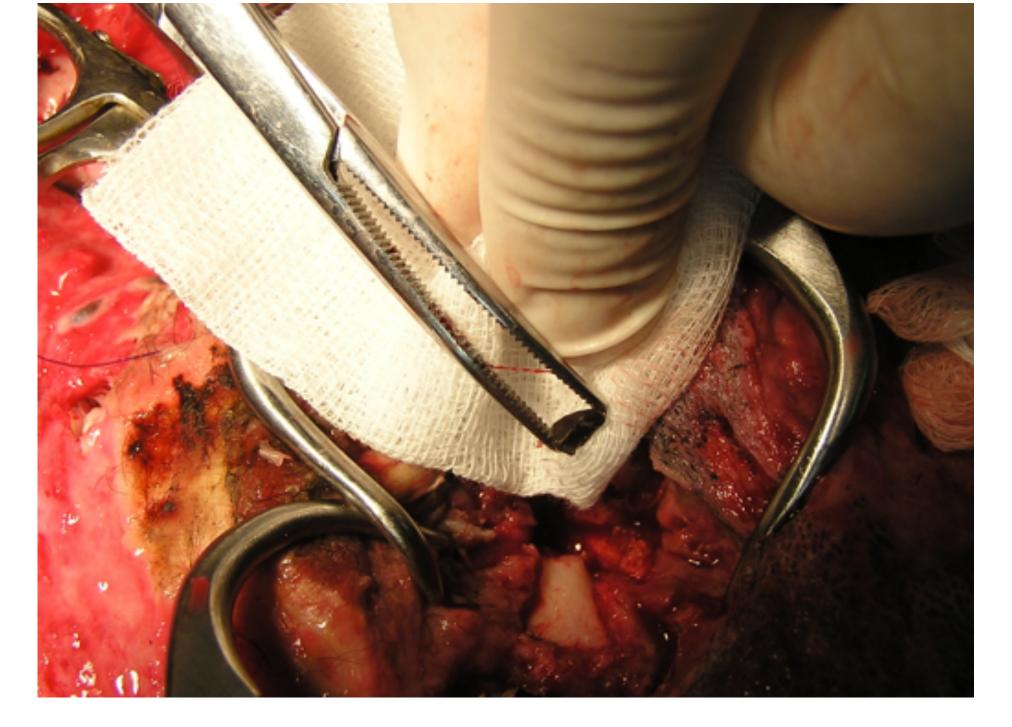
Shearing injury?

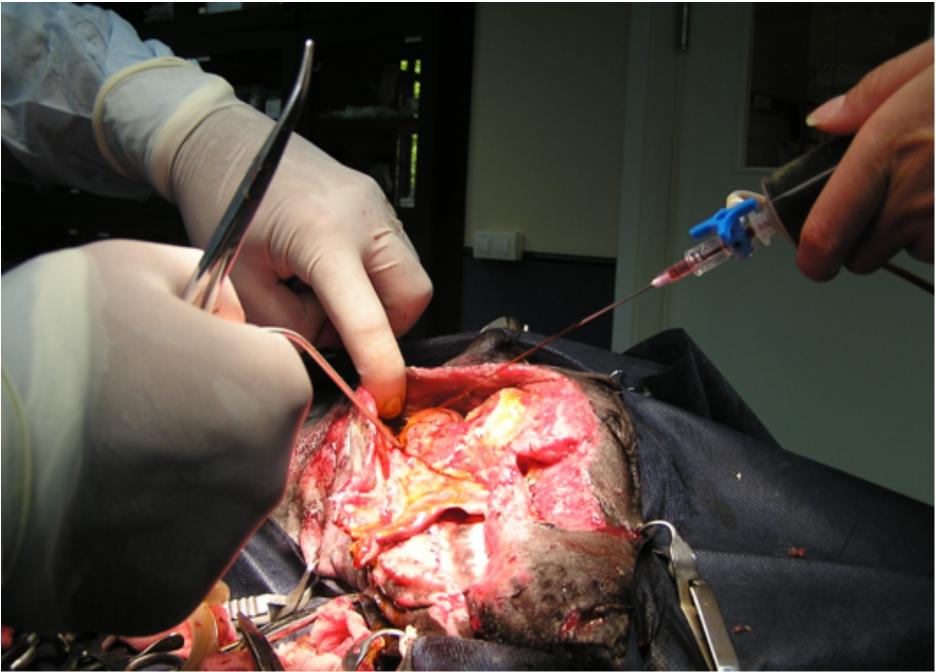


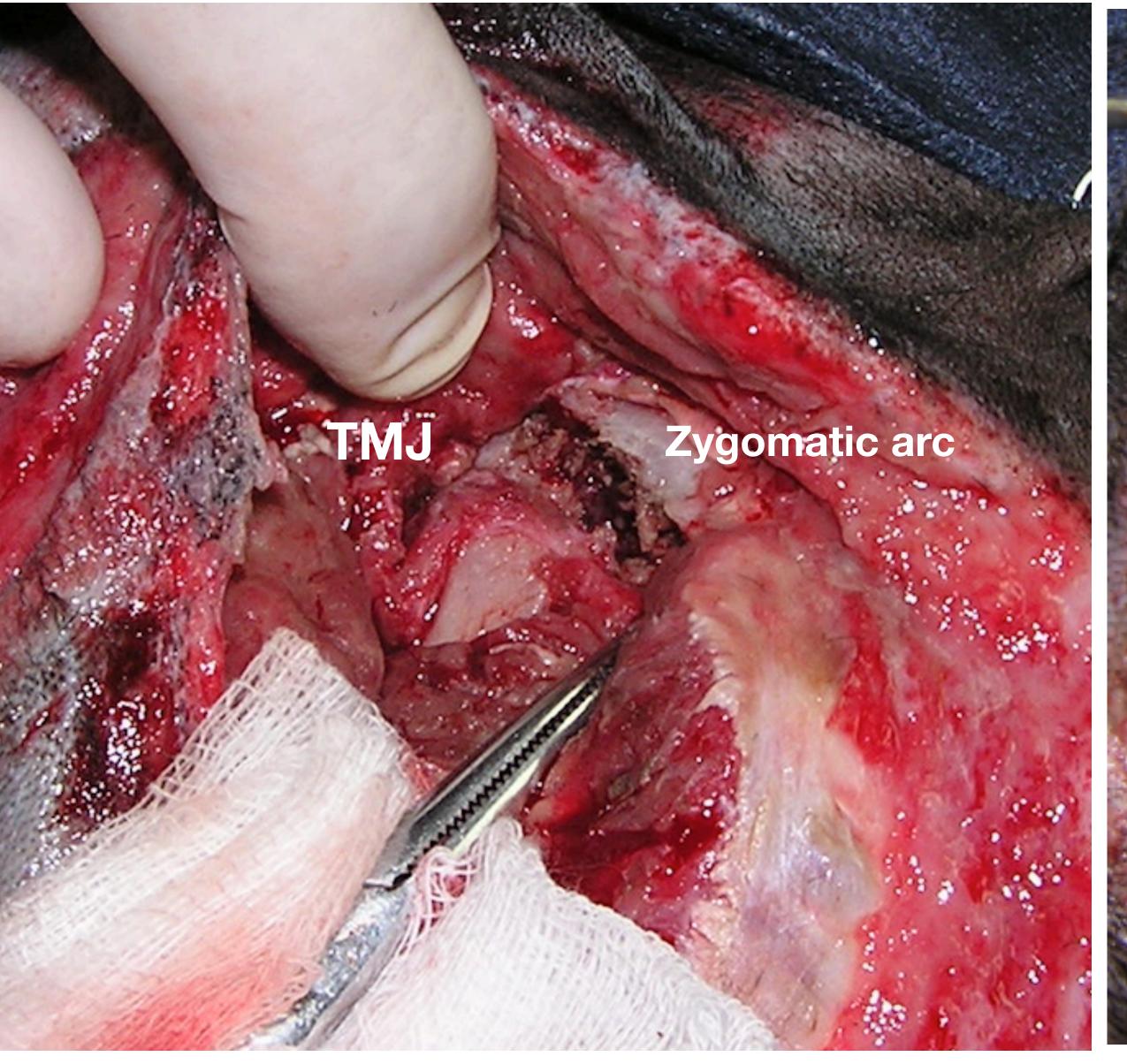


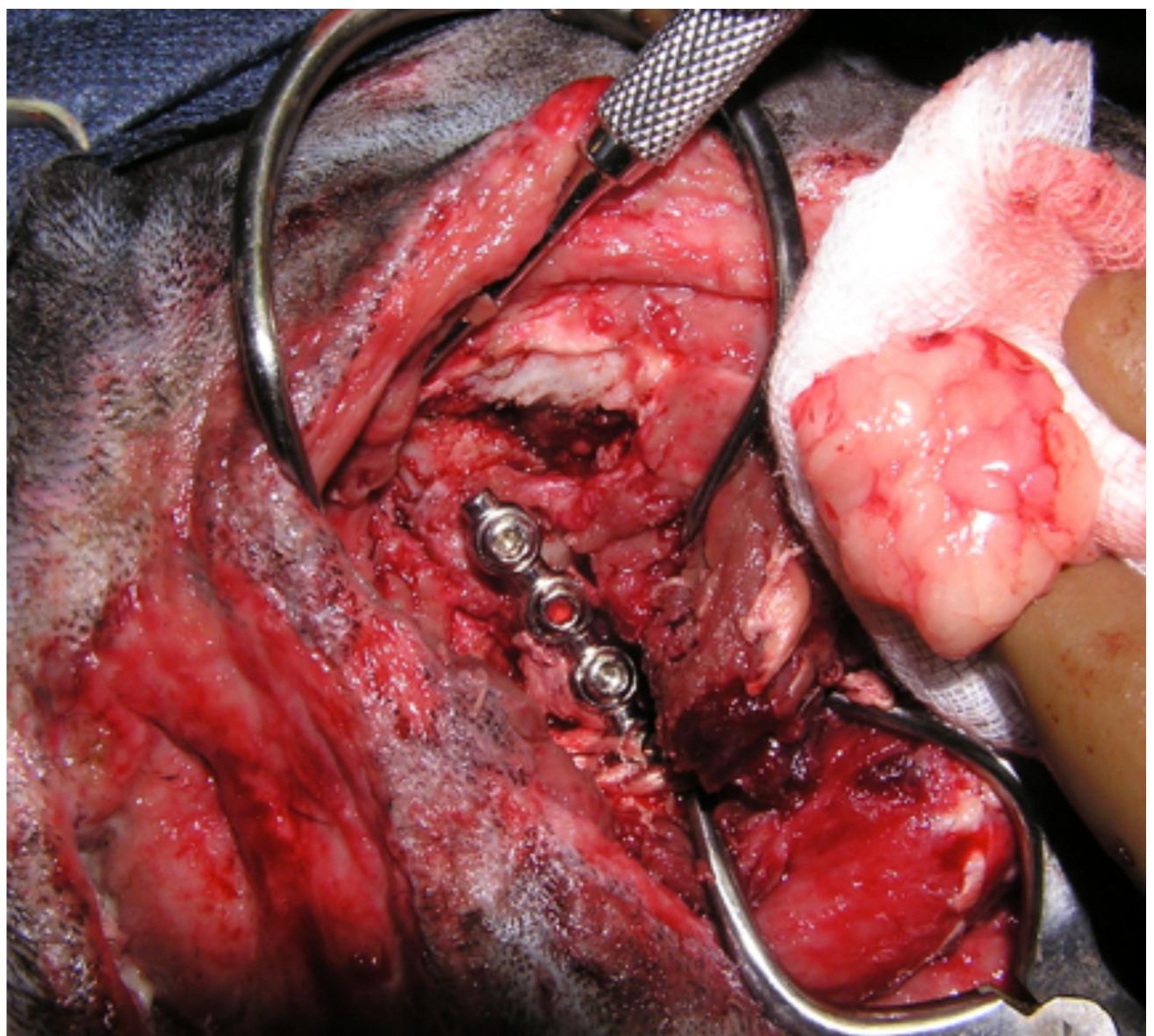


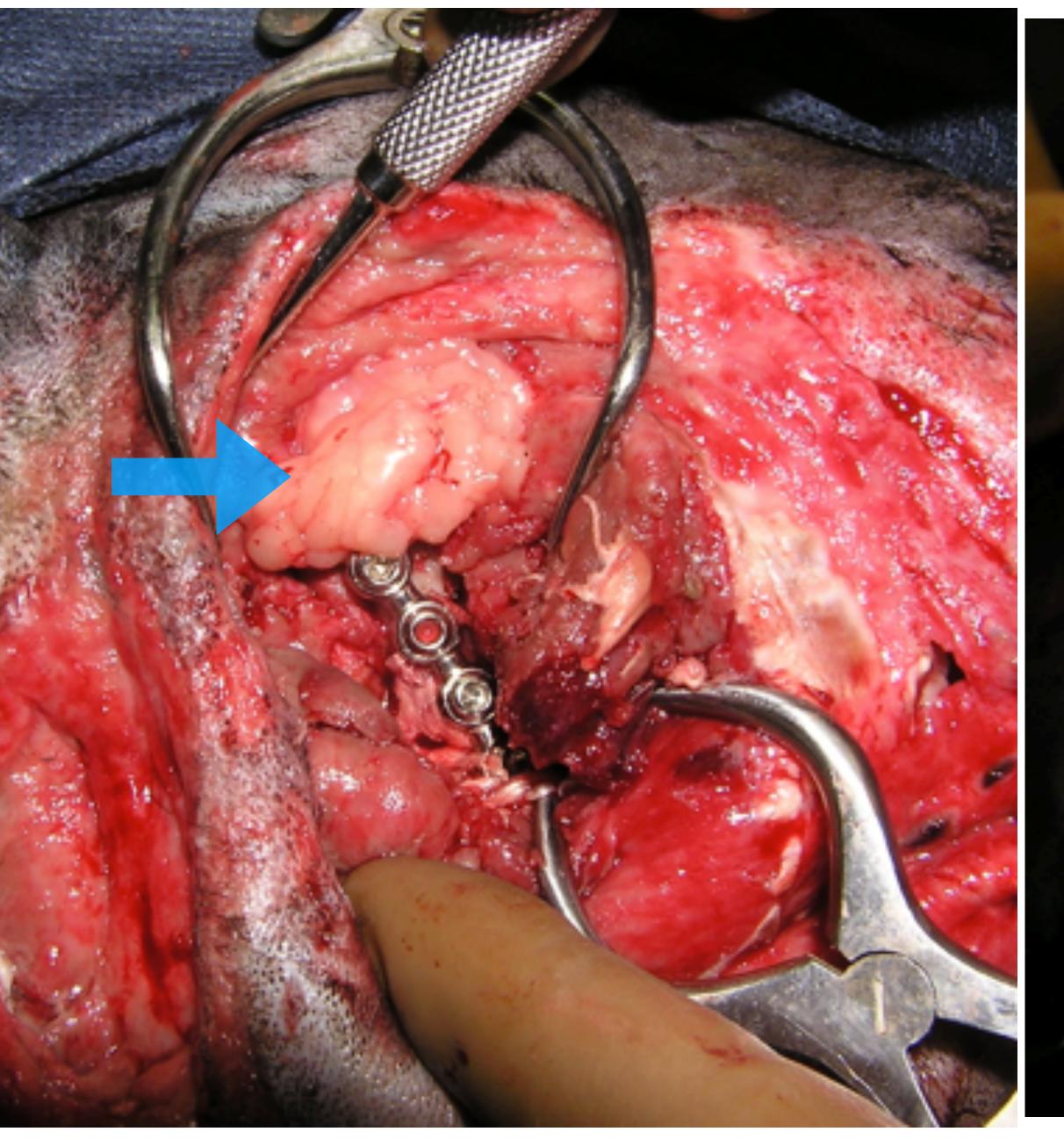


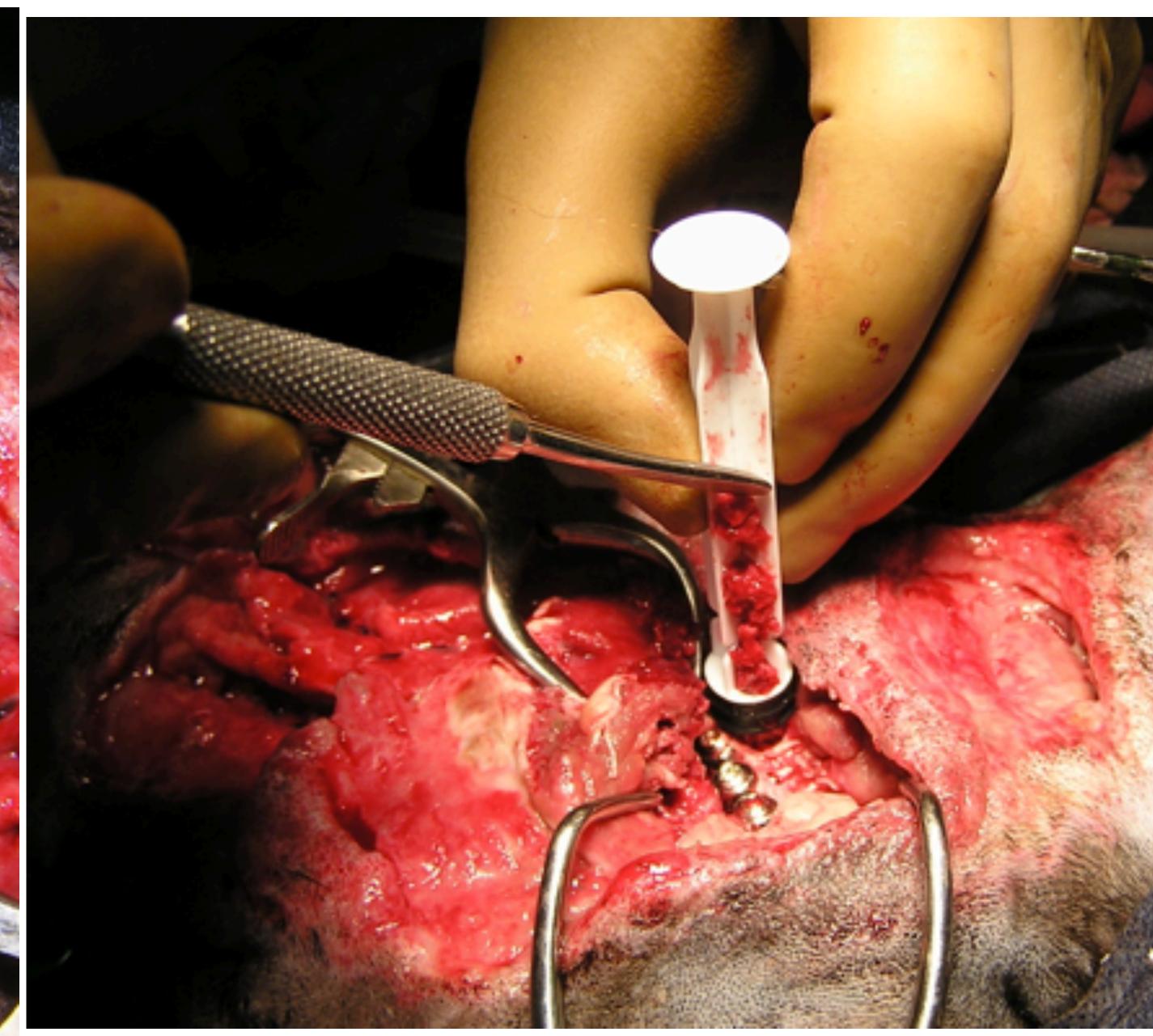






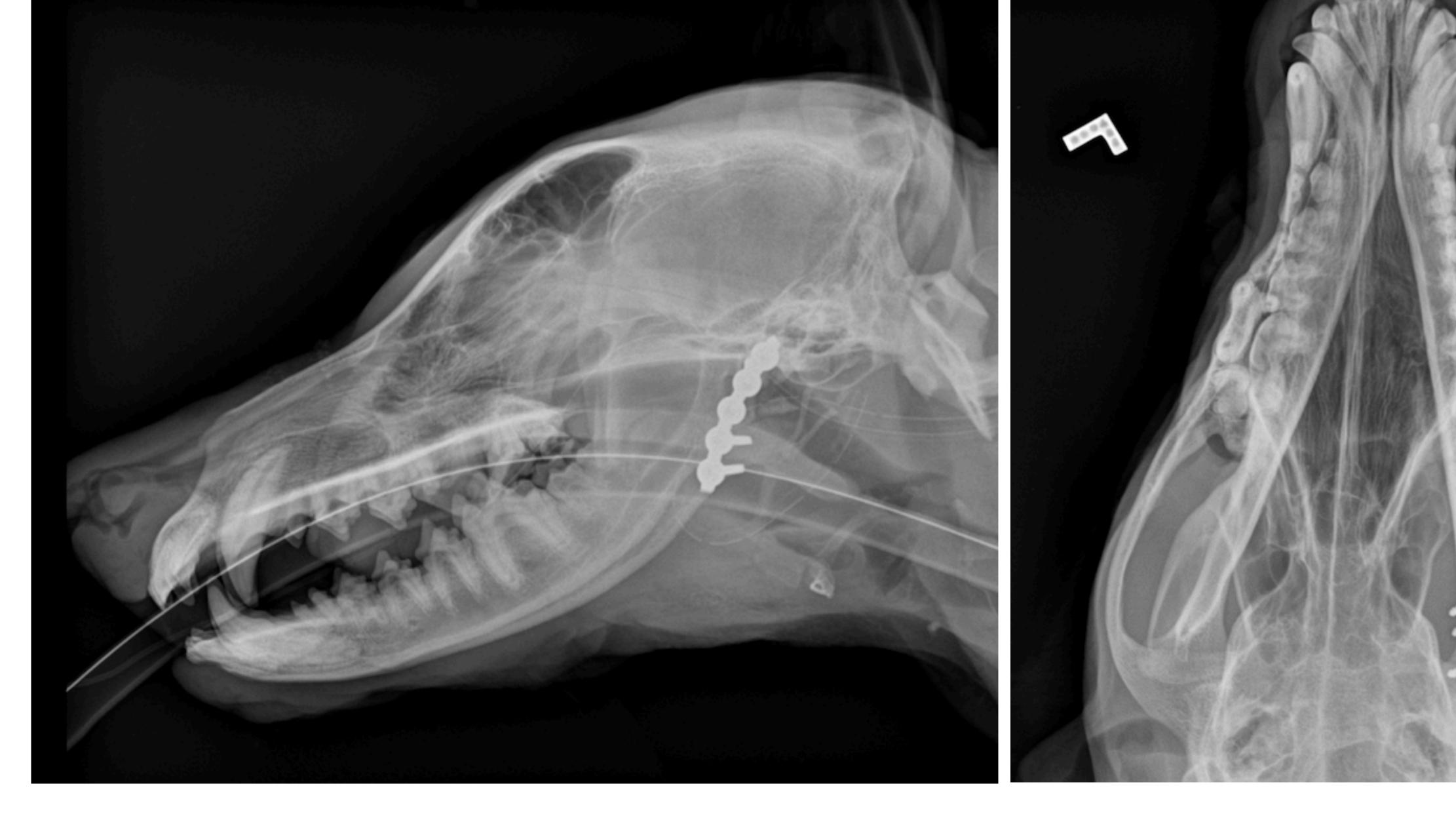


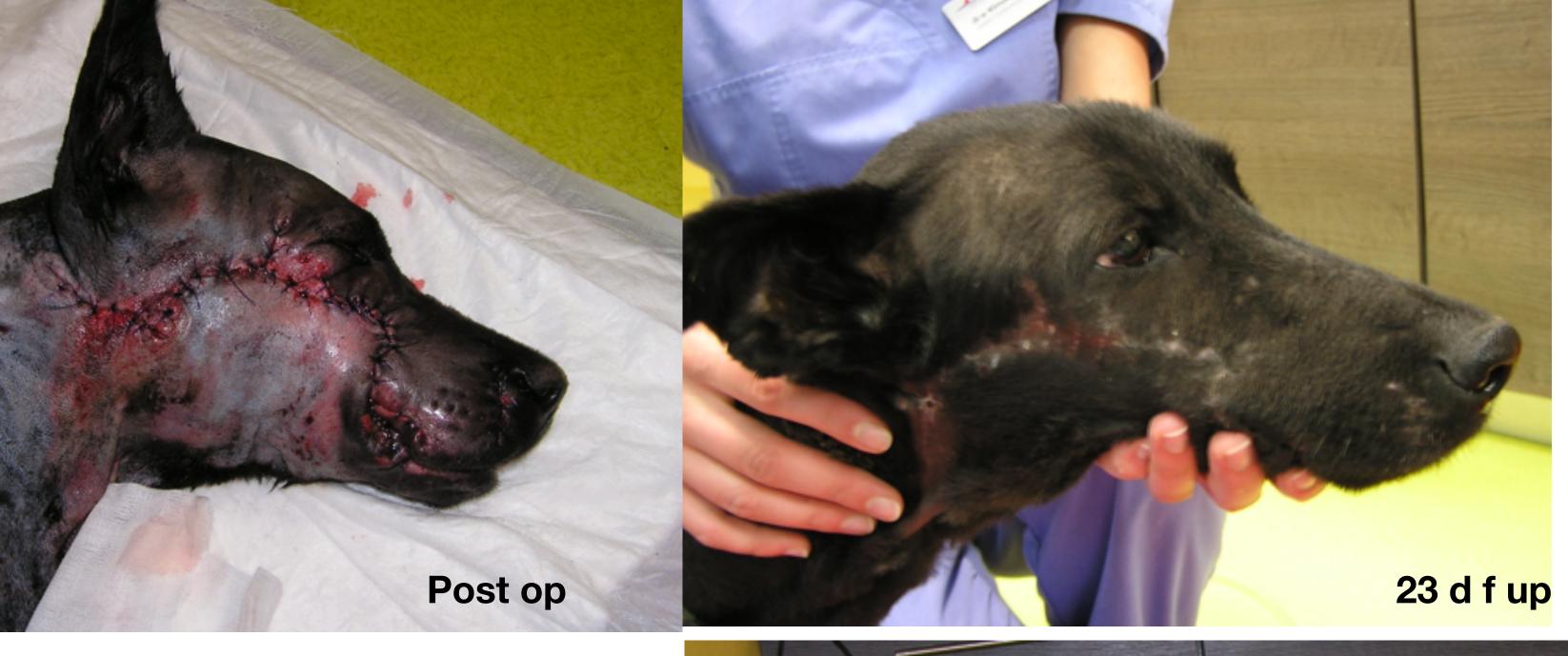




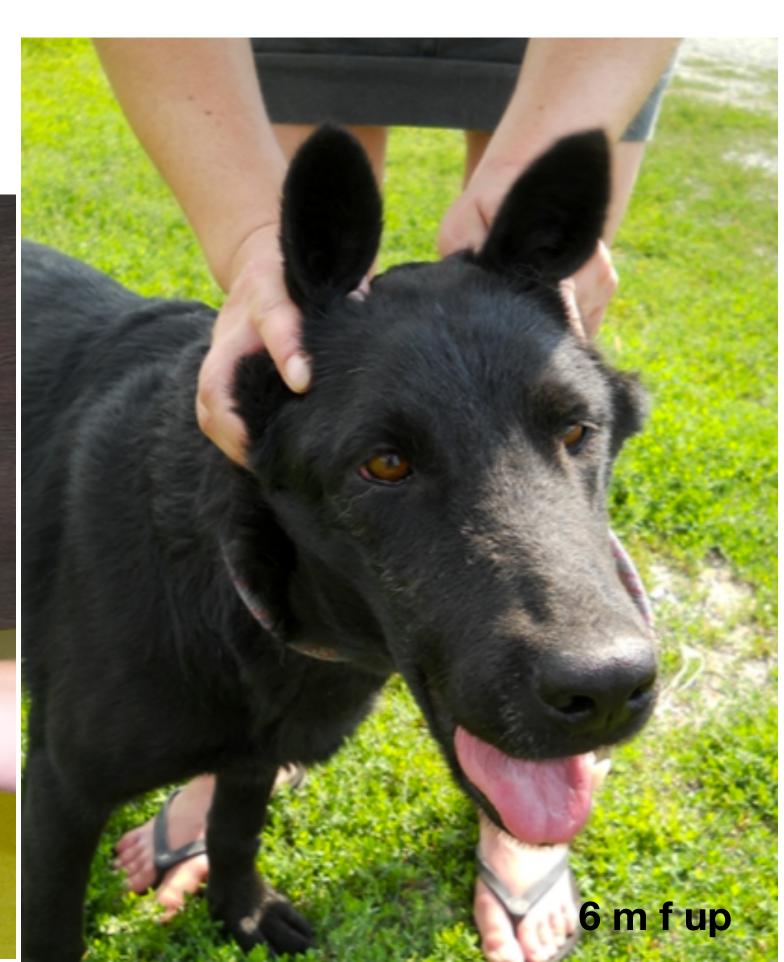








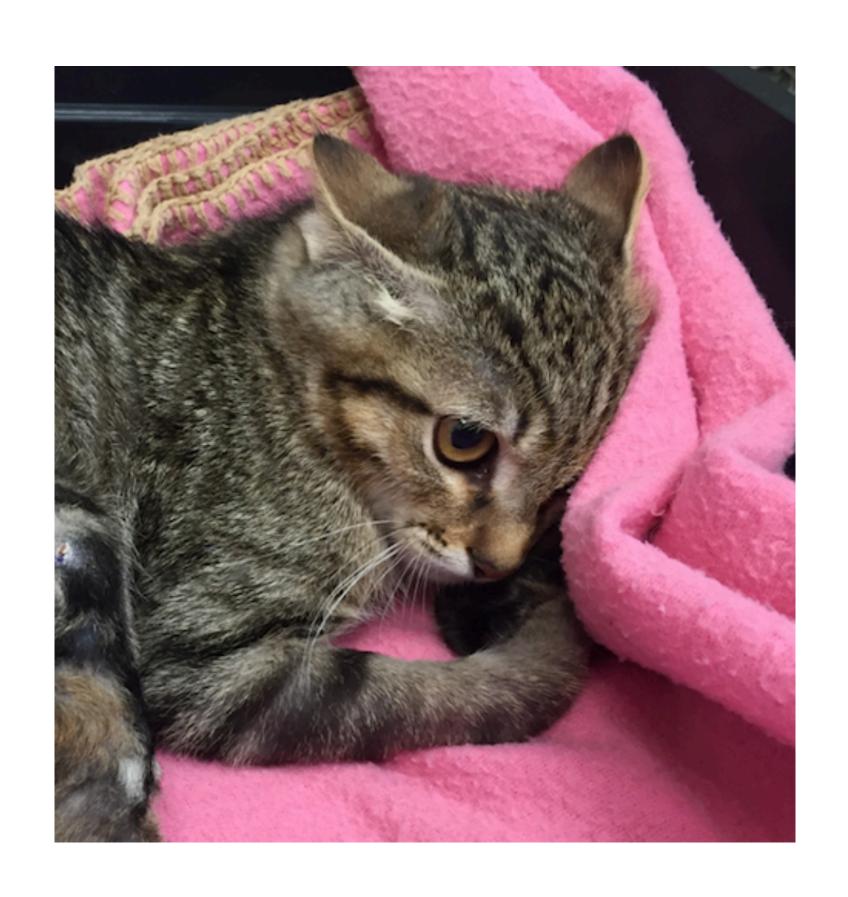




Complex limb defects

Mono

- 3,5 m old, kitten, 850 g
- Found on the street- severe hind leg trauma
- Amputation suggested



Soft tissue loss

Circular "Cuff" compression

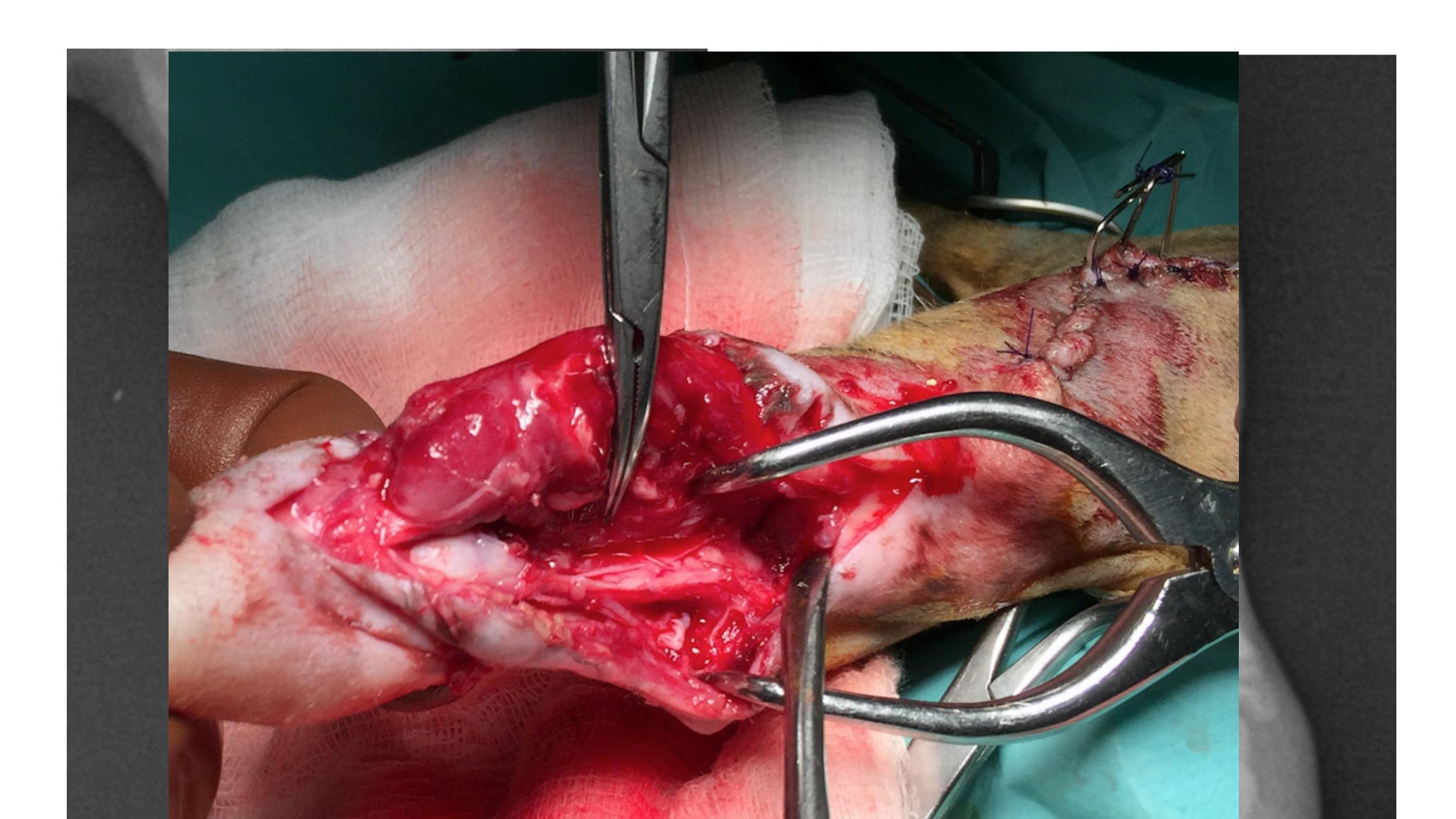


Bone fractures





DEVASTATING bone loss



- Treatment plan?
- Implants?
- How many surgeries?

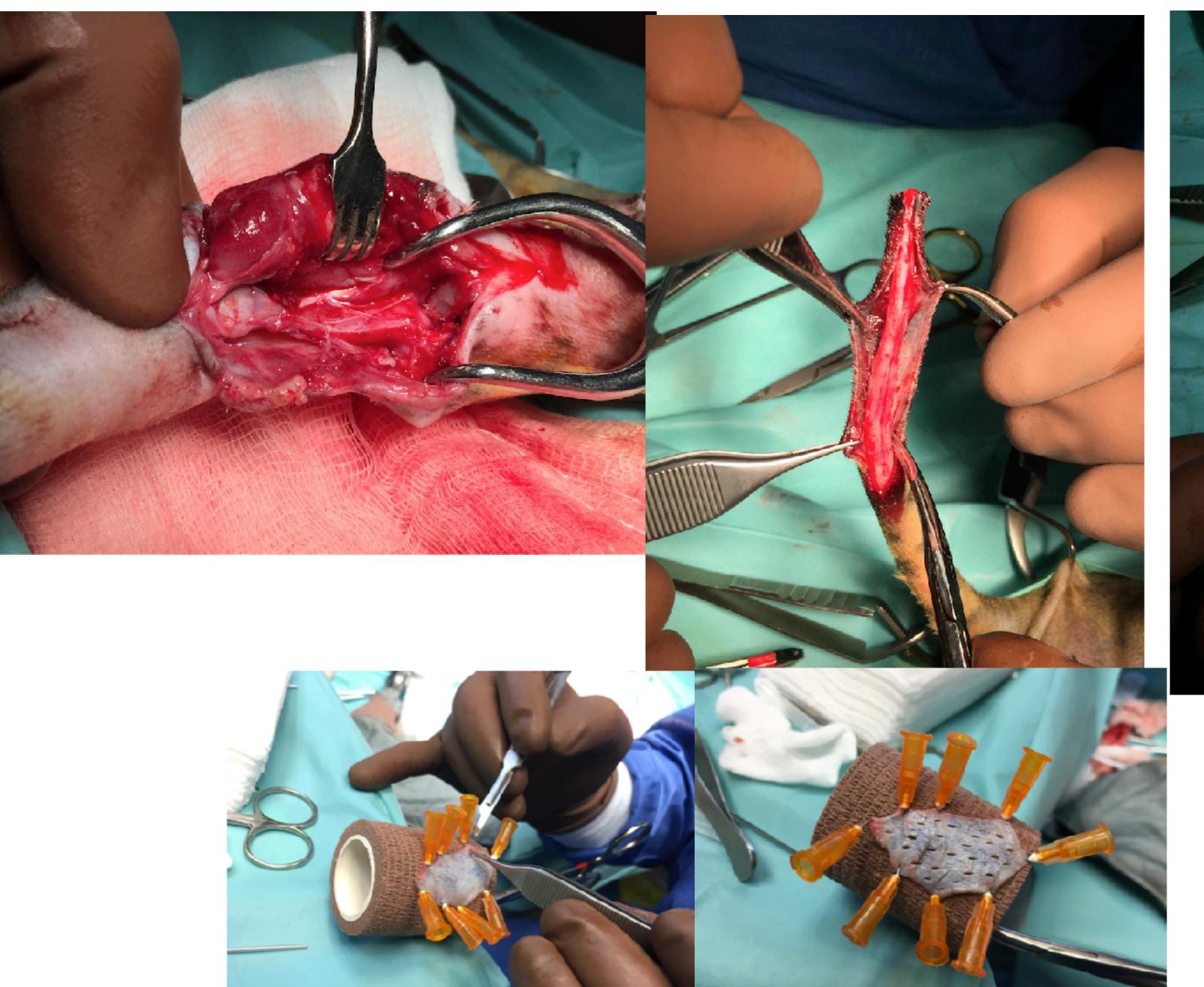






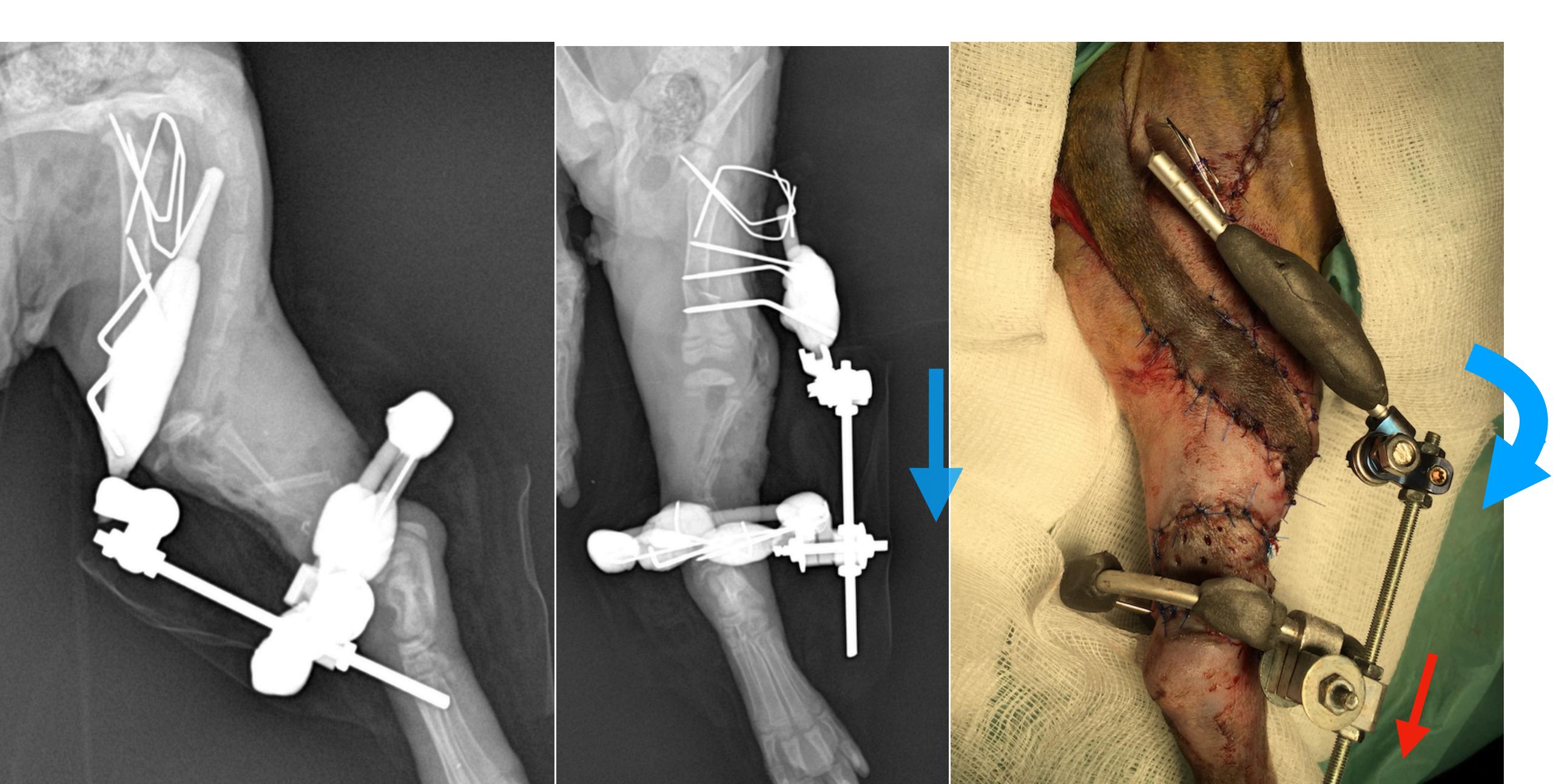


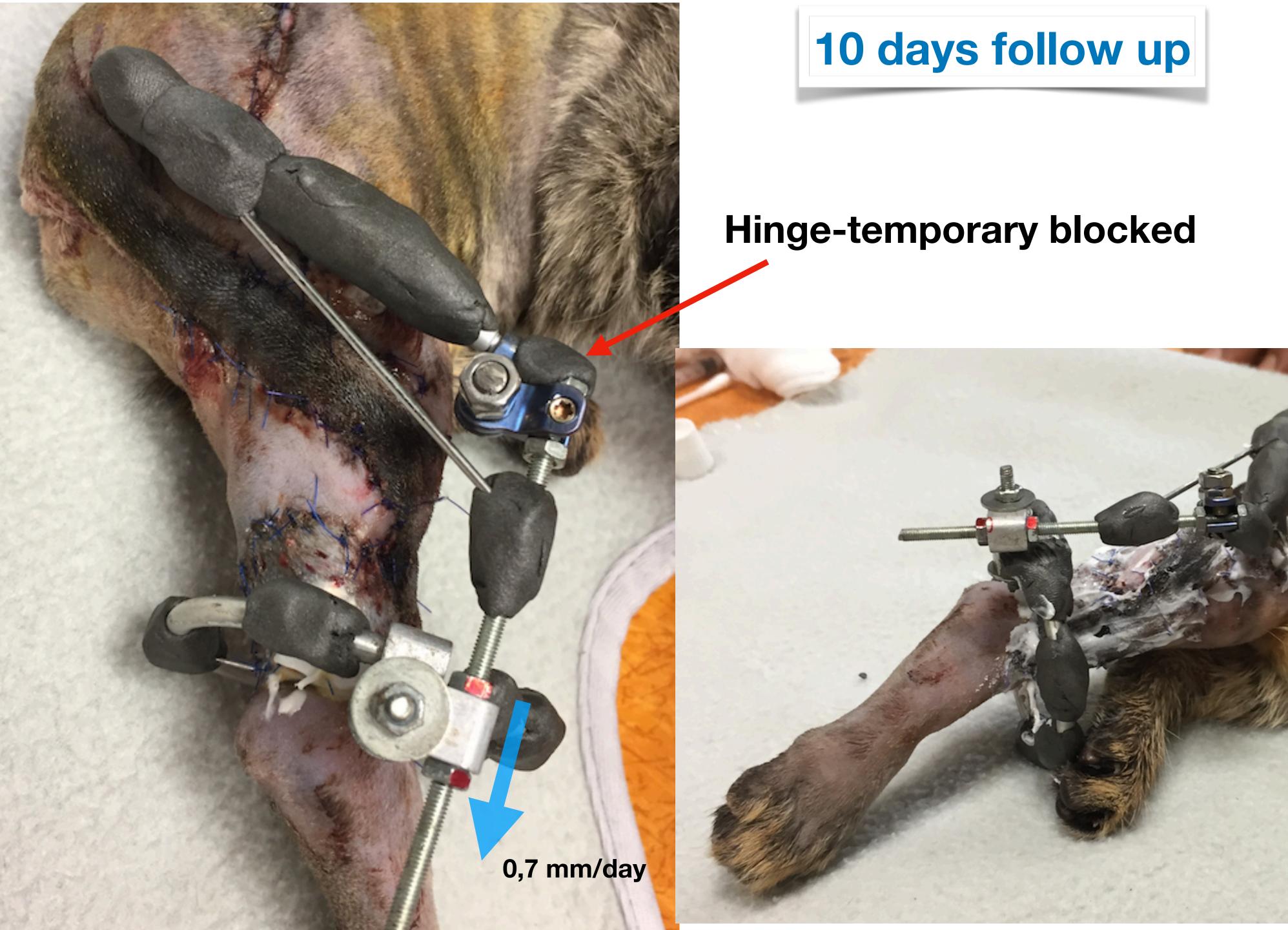
"Axial distant full organ tail flap"





Transarticular ESF, hinged, dynamic distraction





21 days follow up







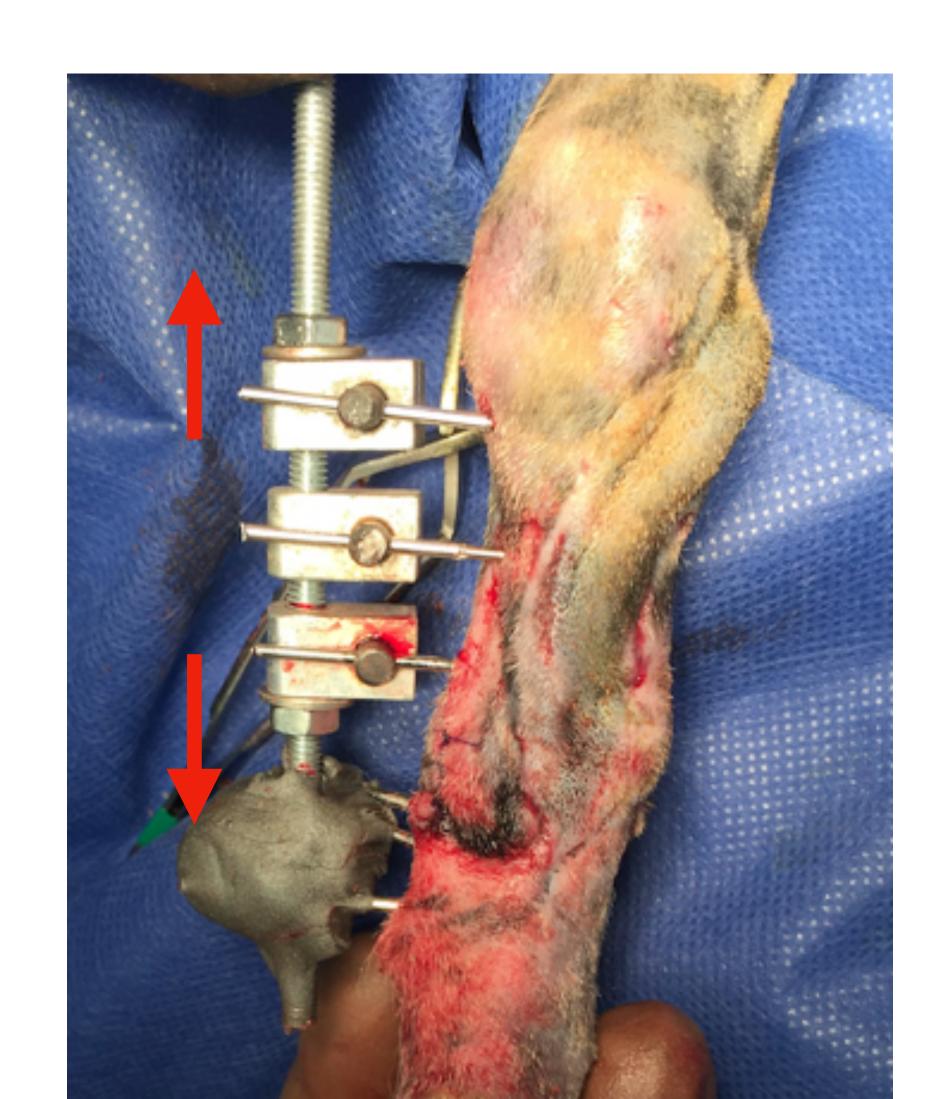
<4 m of age



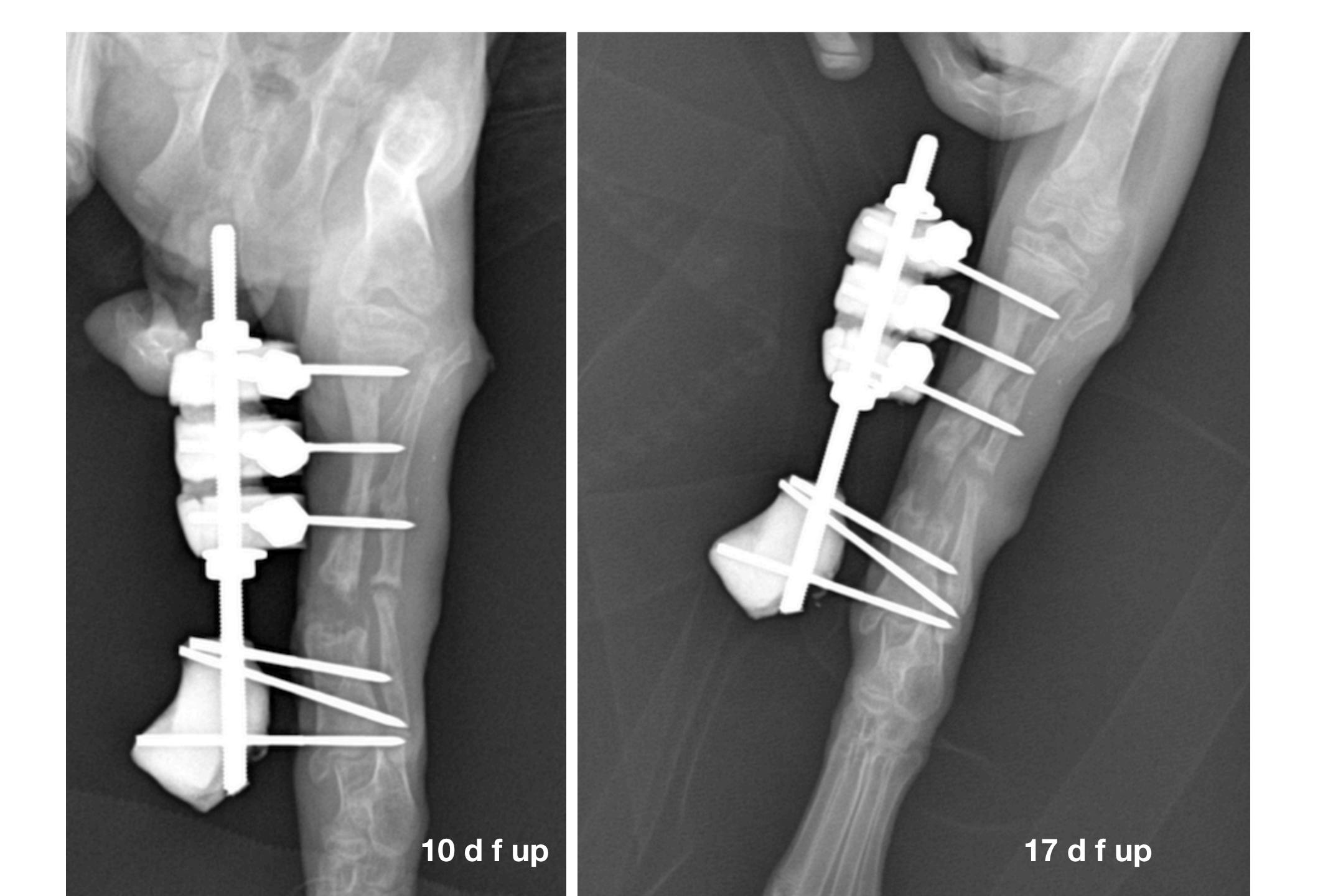


What's next?

Distraction osteogenesis- linear device









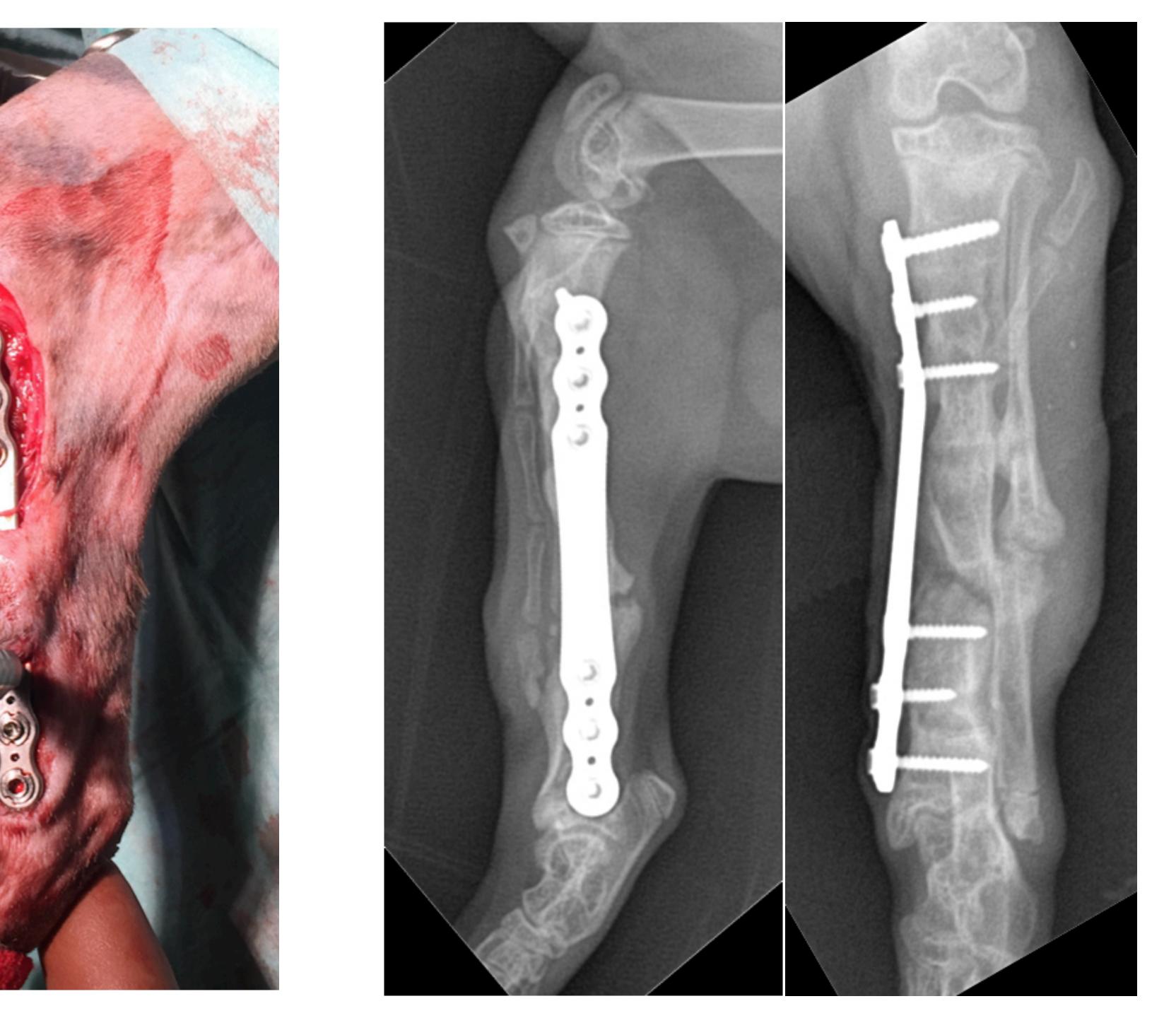
27 days follow up











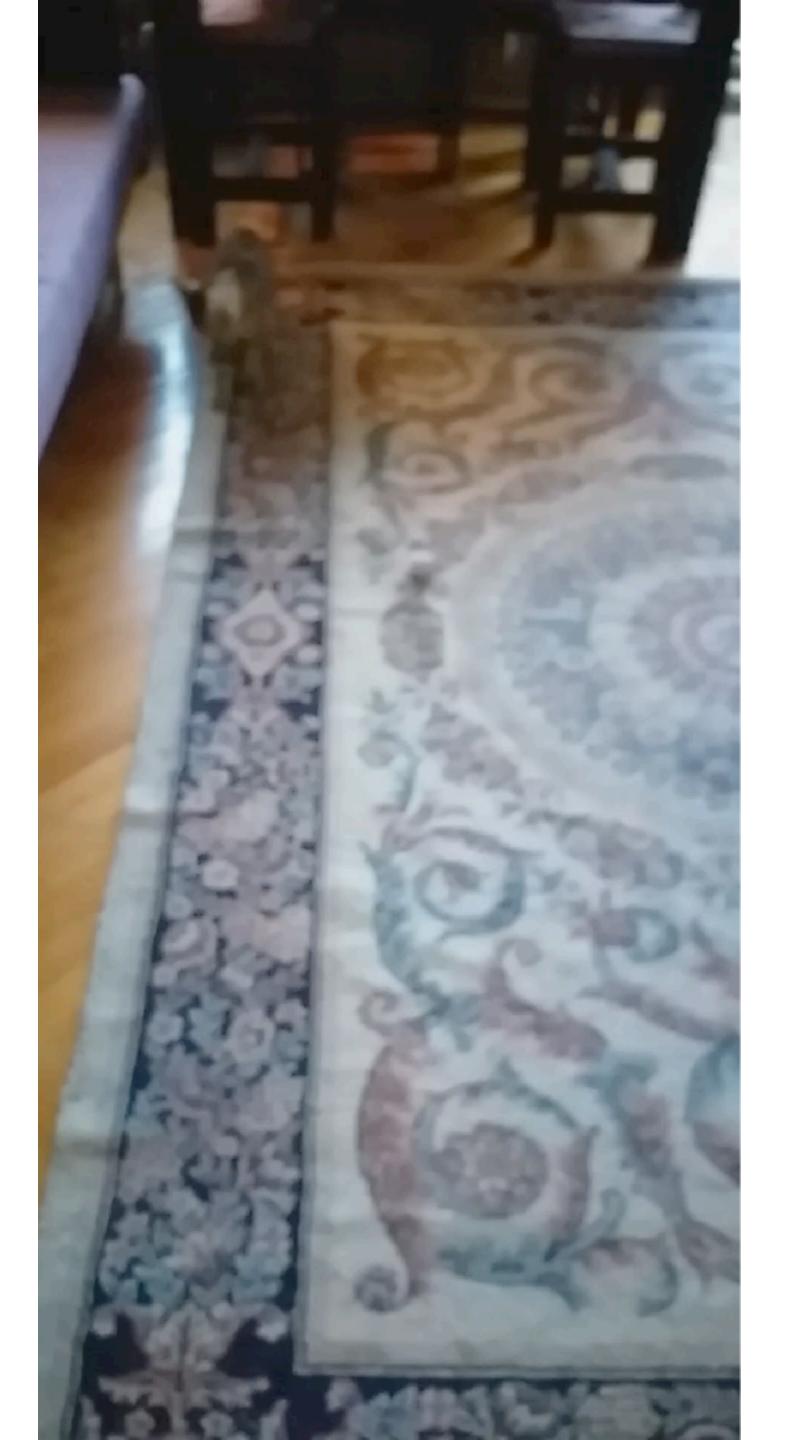
2 m f up



4 m f up

3,2 kg



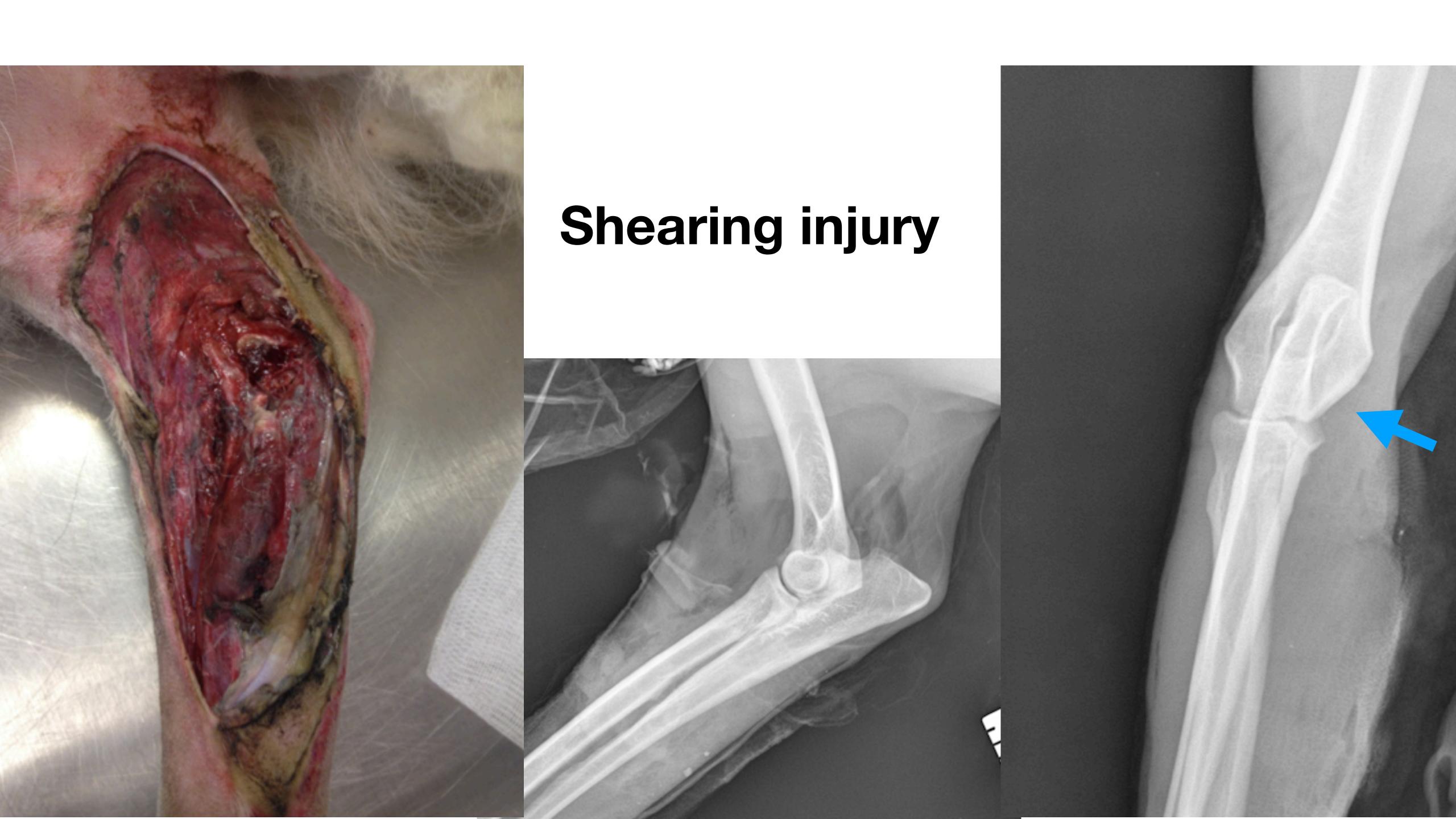


Case 10

Winnie

- 5y old,samoyed, 23 kg
- HBC, shearing injury





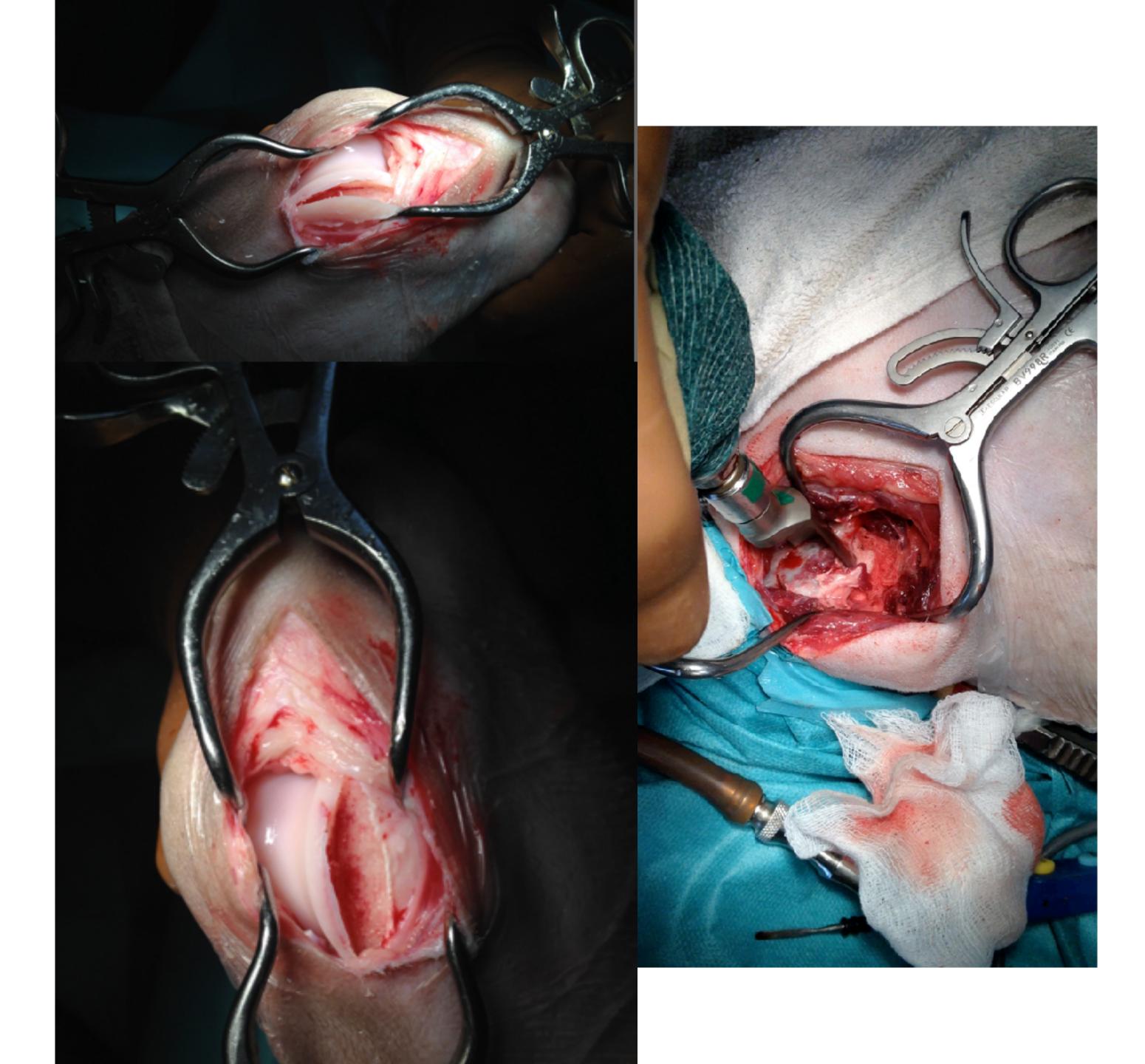


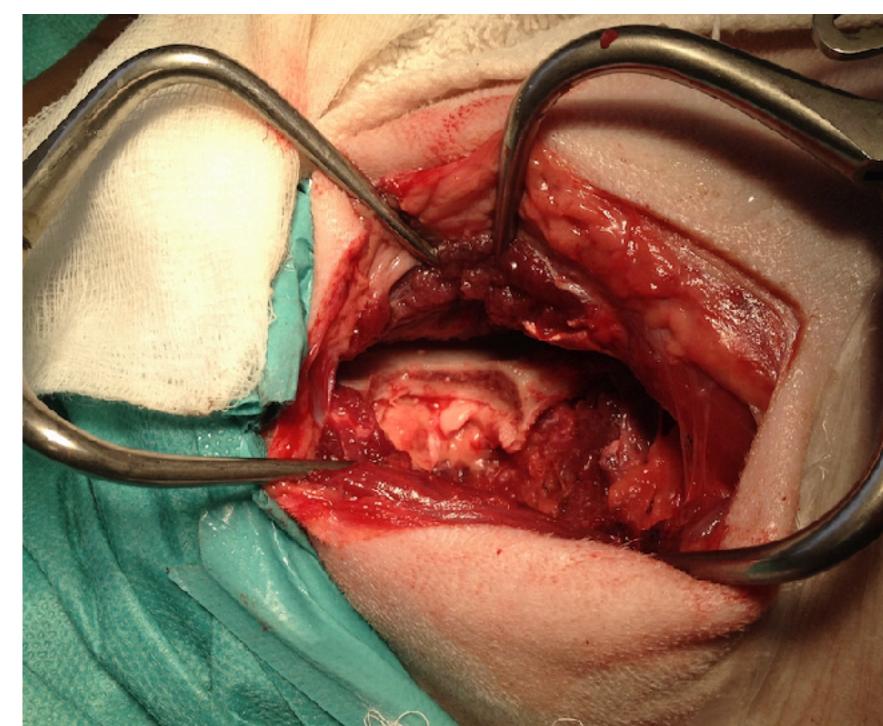






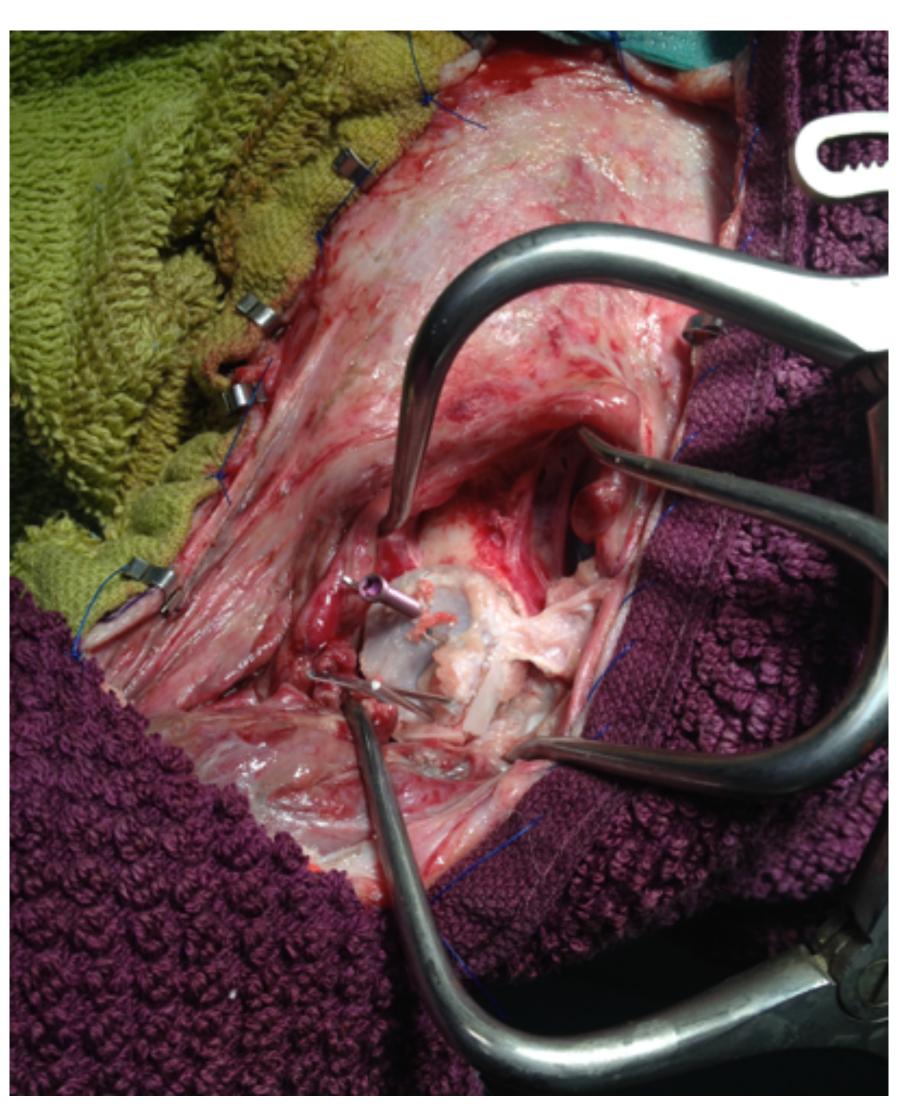


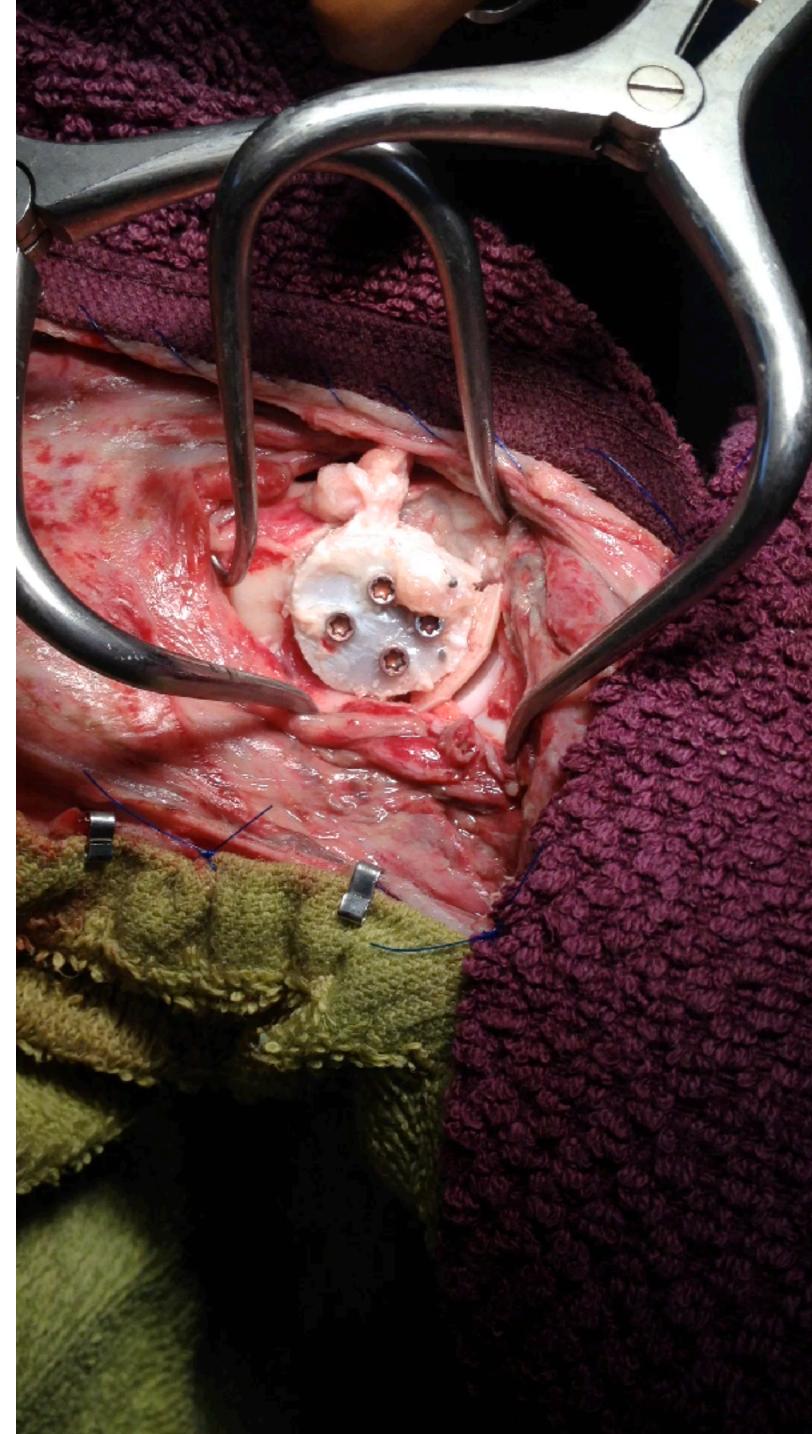




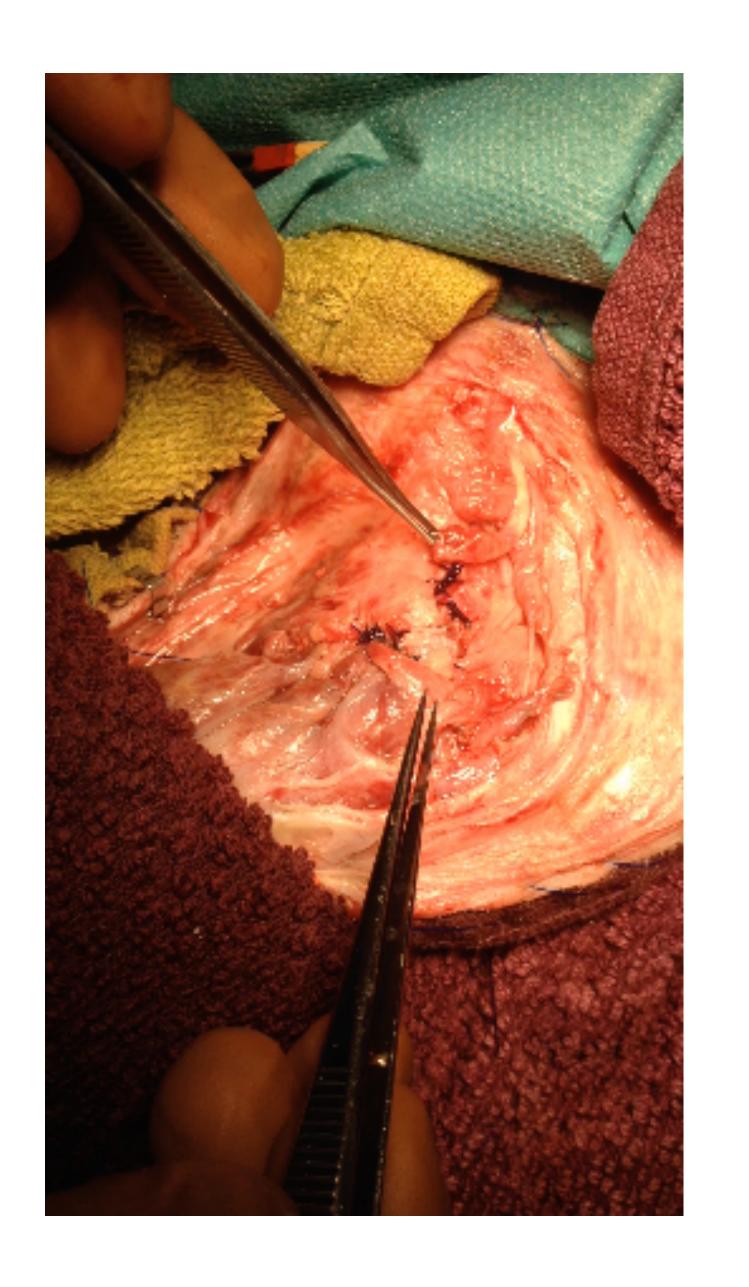


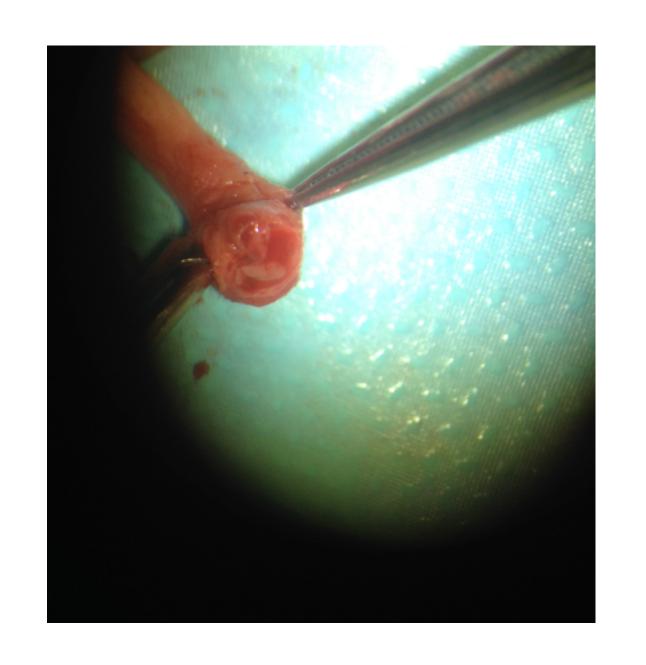


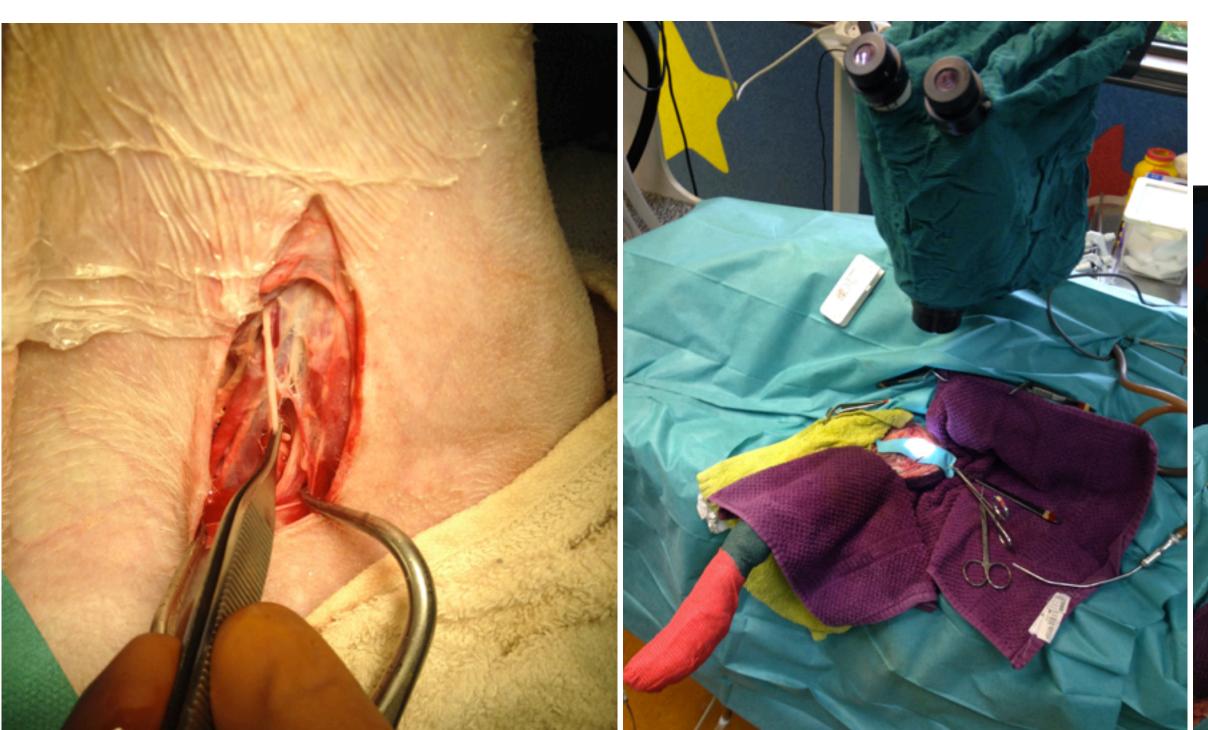


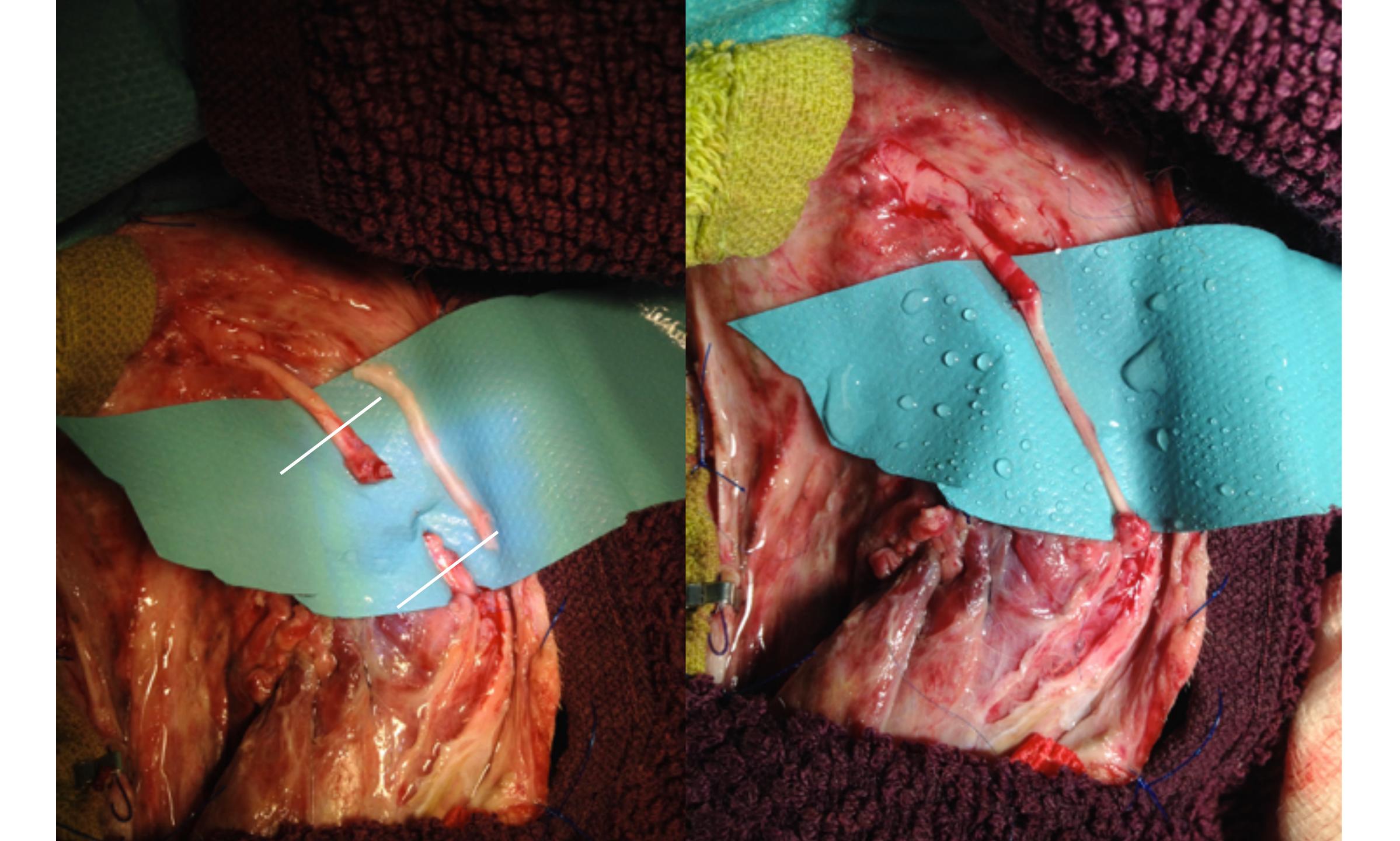






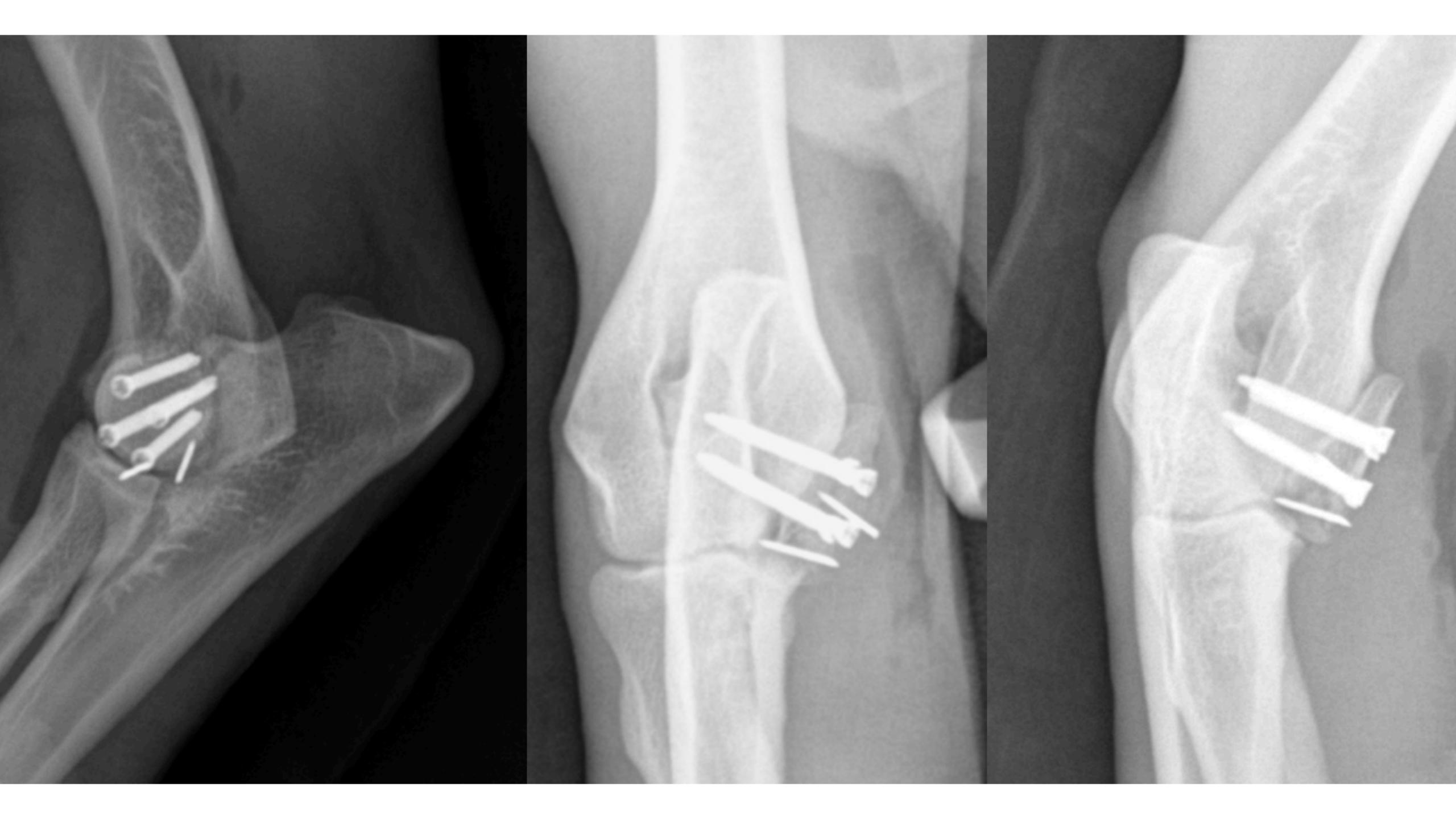






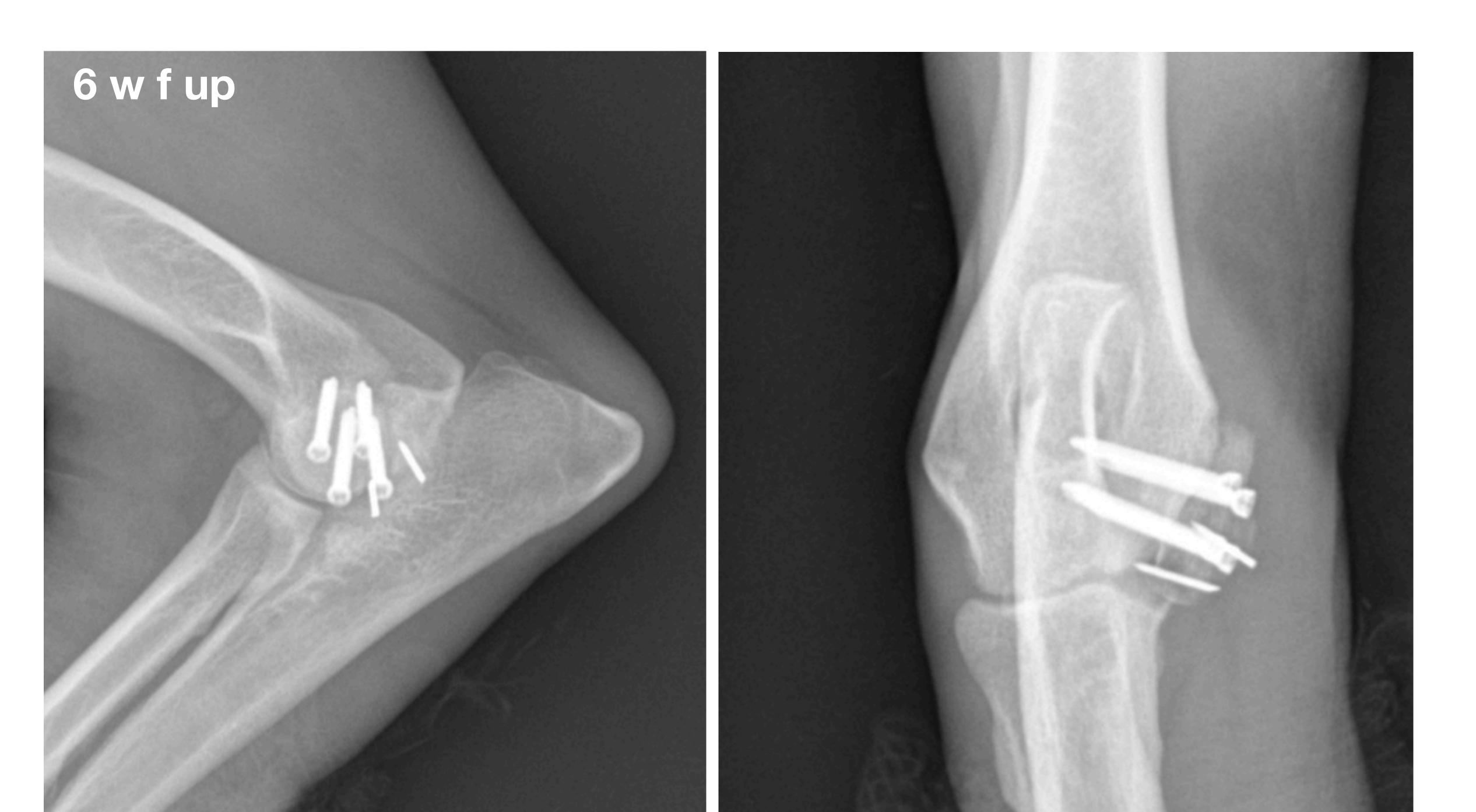




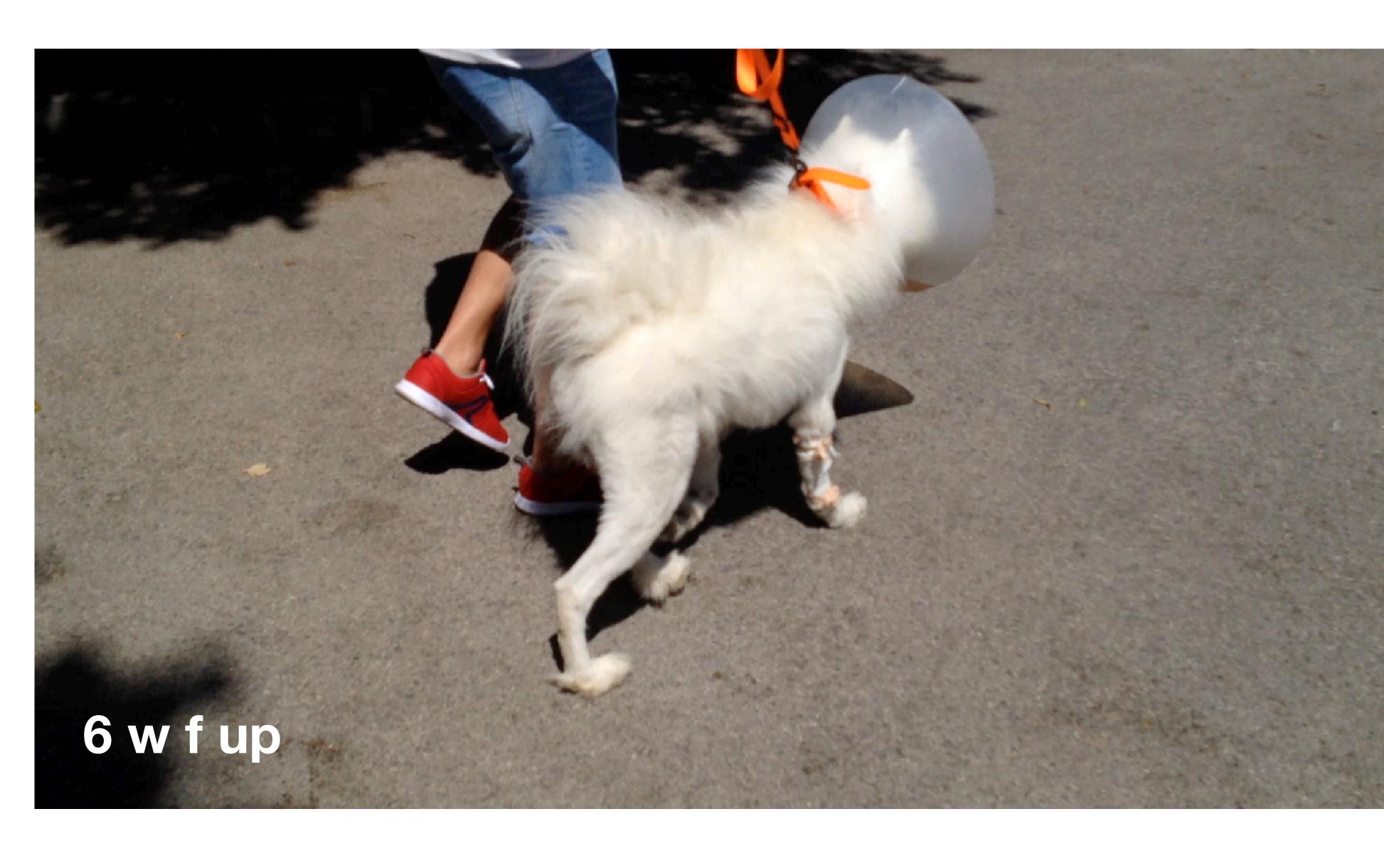


Dishachrage from the clinic, 4 d f up

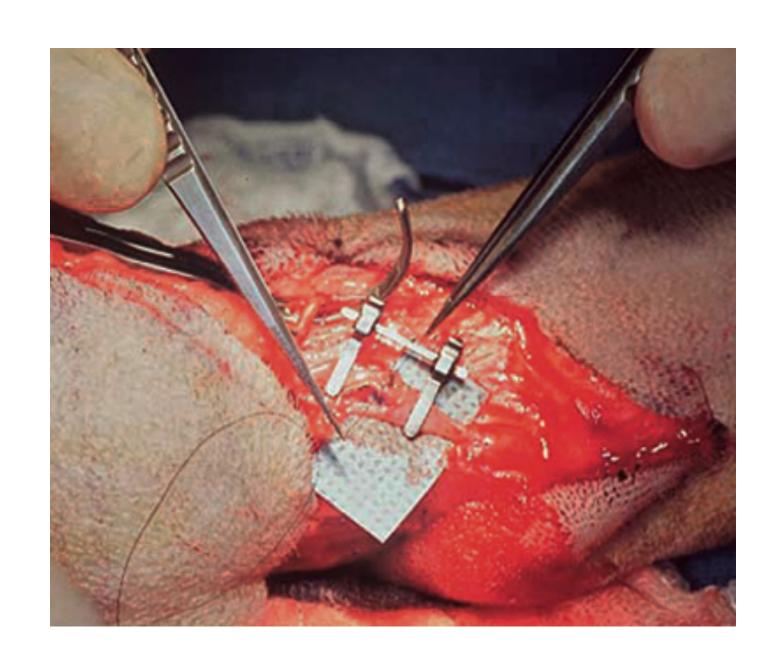


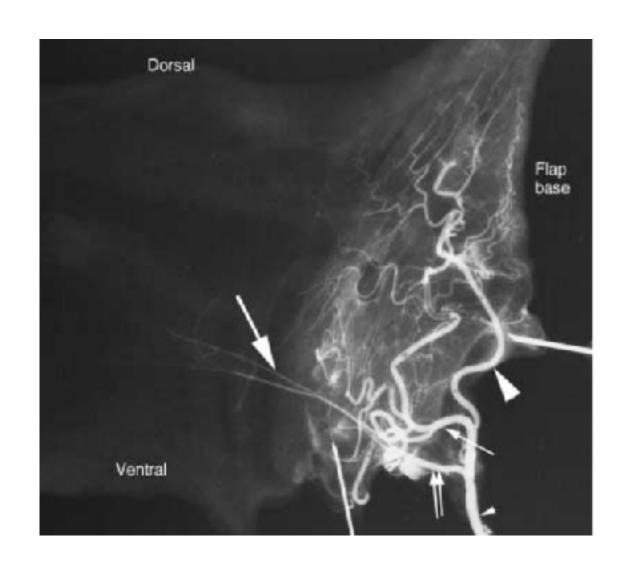


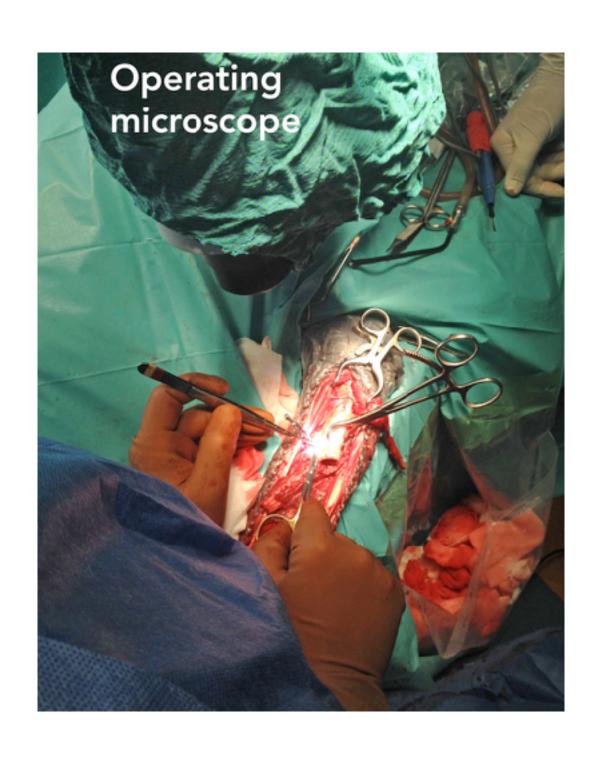




Microvascular transfers







CASE REPORT

34:297-30

Repair of a canine forelimb skin deficit by microvascular transfer of a caudal superficial epigastric flap Surgical Approaches to Recipient Vessels of the Fore- and HindLimbs for Microvascular Free Tissue Transfer in Dogs

DANIEL A. DEGNER, DVM, Diplomate ACVS, RICHARD WALSHAW, BVMS, Diplomate ACVS, J. DAVID FOWLER, DVM, Diplomate ACVS, OTTO I. LANZ, DVM, Diplomate ACVS, PETER OCELLO, MSc, JACKIE MAIER, DVM, LOREN BLAEZER, DVM, Diplomate ACVS, and RICK J. SMITH, MD

Thank you:)

