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P159 - NEUROLOGICAL OUTCOMES OF PERIPHERAL NERVE INJURIES

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Resumen

Objectives: Peripheral nervous system consists of nerve fascicles and surrounding connective tissue. Motor, sensoryand autonomic function loss may develop after various trauma types like blunt, penetran, compression, and gunshot injuries. In this presentation, we documented our experience with traumatic nerve injuries.

Material and methods: We reviewed clinical, electrophysiological and etiological characteristics of 150 patients who were operated in our institution. Pre-operative and post-operative electrophysiological findings were analyzed retrospectively. These cases were classifed based on their etiology, type of surgery, intraoperative neuromonitoring findings and the effects of length of surgery on the clinical outcome.

Results: In our study, 120 patients had one nerve injury and 30 patients had multiple. 39 of patients had ulnar nerve injury, 38 of patients had peroneal nerve injury, 31 of patients had sciatic nerve injury, 11 of patients had median nerve injury, 9 of patients had brachial plexus lesion, 22 of patients had radial nerve injury. Various surgical techniques were used. Decompression of the nerve and internal neurolysis were the most common technique. The other techniques are: neuroma excision, end to end repair, and decompression assisted by neuromonitoring. We found that neuromonitoring effects the outcome of repair positively.

Conclusions: Peripheral nerve injuries are major problem and cause work force loss. Surgery is the main treatment option. The outcome depends on the etiology and the type of surgery.

Key words: Peripheral nerve. Surgery. Injury.