Complete Circumferential Degloving Injury Of Arm. A Case Report

[1]Azwan ZB, [1]Fikry MI, [1]Kamarul Al- Haqq AG
[1]Orthopedic Department, Hospital Tengku Ampuan Rahimah, Klang

INTRODUCTION:

Severe circumferential soft tissue defect of the upper limb is not common. Depending on the underlying etiology, wound care and the management of the injury could be challenging.

MATERIALS & METHODS:

We present a case of a 53 year old man with an alleged motor-vehicle accident. Patient sustained circumferential degloving injury of right arm with fracture of supracondylar humerus. Patient went for extensive wound debridement on day 1 post trauma with k-wires inserted over the supracondylar humerus and a positional external fixation was applied for the wound management. Figure 1. After 10 days post trauma, patient was electively planned for Split Skin Graft (SSG) of the right arm.

Figure 1.

RESULTS:

A positive results were obtained with evidence of wound contraction after few minimal debridement on the grafted skin. Patient went for post operative rehabilitation to regain upper limb function with regular reassessment.

Figure 2.

DISCUSSIONS:

Complete circumferential degloving injury of the upper limb is not common . It can be due to various etiologies, each of which requires different approach to management [1].Figure 3 Knowing the pattern of the injury as described by Arnez et al is essential in order to plan the proper management with the good outcome.

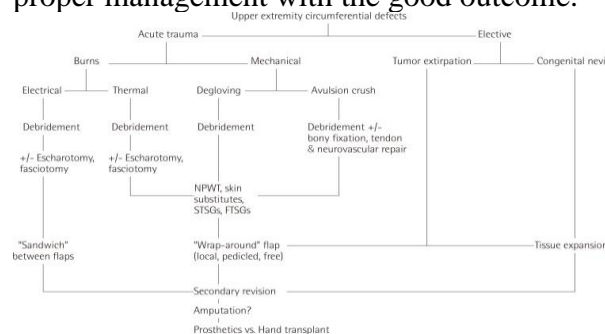Figure 3.

CONCLUSION:

To manage a circumferential traumatic wound of the limb is absolutely demanding. An extensive wound debridement with an efficient wound care technique follows by split skin grafting is the best choice of management we have encountered.

REFERENCES:

1. Zhi Yang Ng et al. Soft Tissue reconstruction of a complete circumferential defect of upper limb.
2. Z.M. Arnez et al. Classification of soft-tissue degloving in limb trauma