

International Conference on

August 06-07, 2018 | Tokyo, Japan

J Surg Clin Pract 2018, Volume: 2

Experience on digit replantation under wide awake local anesthesia

Hui-Fu Huang National Taiwan University Hospital, Taiwan

igit replantation is usually performed under general ${\sf D}$ anesthesia or brachial plexus nerve block both of which are not as cost effective. In this paper, I would share my experience with digit replantations under wide awake local anesthesia (WALA), which has not yet been reported in literature. Twelve patients who received digit replantations following sharp amputations were included in the study. Our indications for WALA digit replantation include single digit replantation, sharp amputated injury, and estimated time in operation<3 hours, emotionally stable and cooperative patients who do not have other life threatening injuries. WALA was performed with 2% lidocaine infiltrated at the volar midpoint of metacarpophalangeal joint of the affected digit without sedation. Data regarding the level of amputation injuries, replantation time, patient tolerance, and surgical outcome were collected and summarized. A

total of 12 selected patients were included in our study. The male to female ratio was 10:2, with a mean age of 35.4 (range 18-56) years. The injured digits include 1 thumb, 4 index fingers, 4 middle fingers, 2 ring fingers, and 1 little finger. The replantation success rate was 91.7% with a mean operation time of 117.1 minutes. The mean postoperative hospital stay was 7.2 days. All of our patients tolerated the operation well and the functional outcome was satisfactory without any distal interphalangeal joint functional limitation. This is one of the first few papers to report a case series of digital replantations under WALA. We have shown that the results of digit replantation under WALA are comparable to that performed under traditional anesthesia with the added benefit of cost-effectiveness.

dtsurge8@gmail.com