# CONGENITAL HAND

- Reconstructive and plastic surgeon, New Delhi



- Dr. Priyanka Sharma



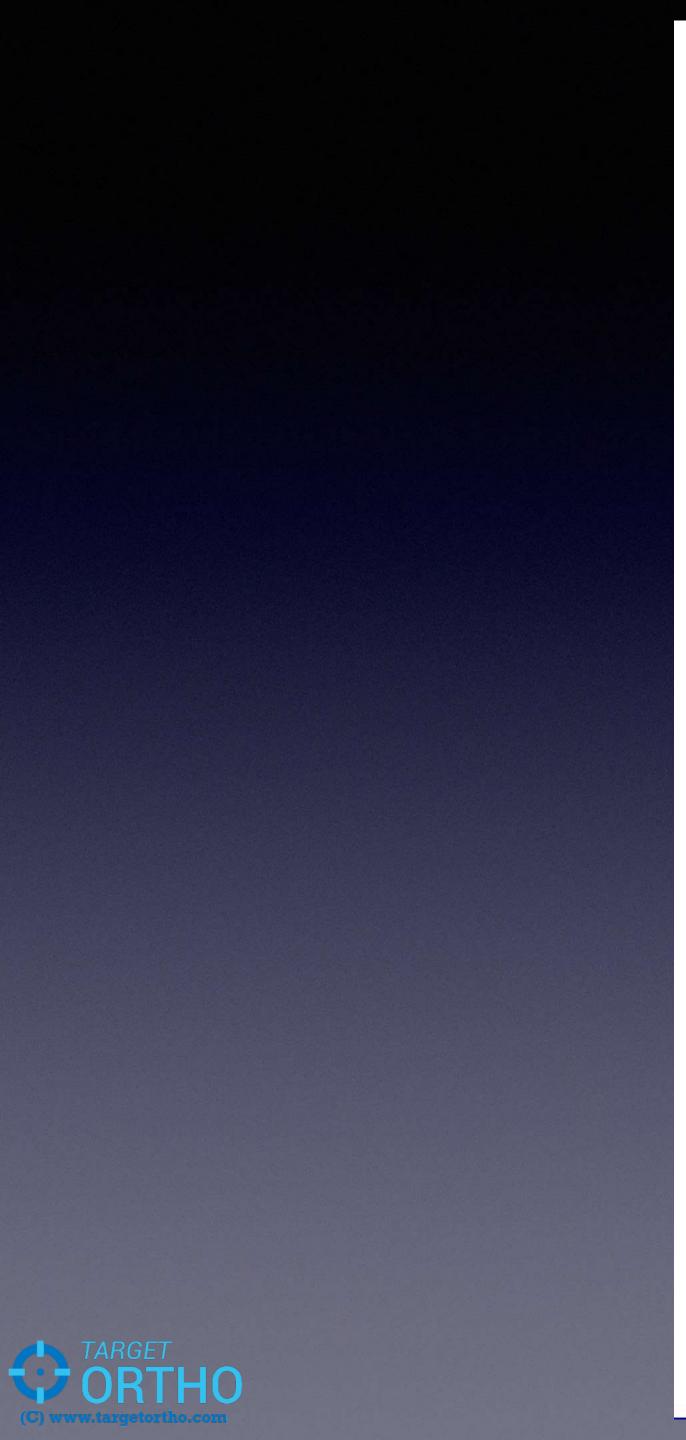
### 4th - 7th week

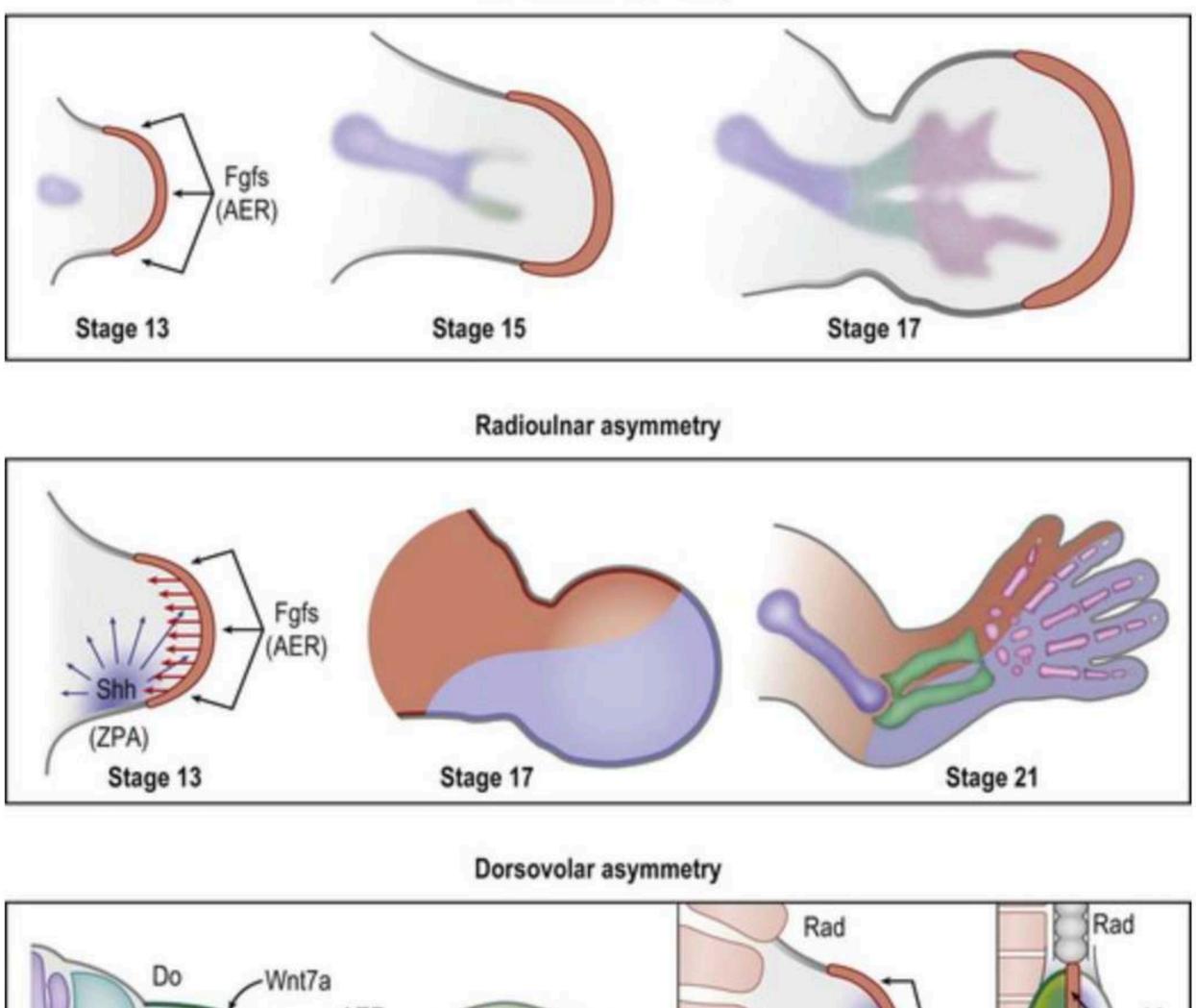
# Timetable of hand development

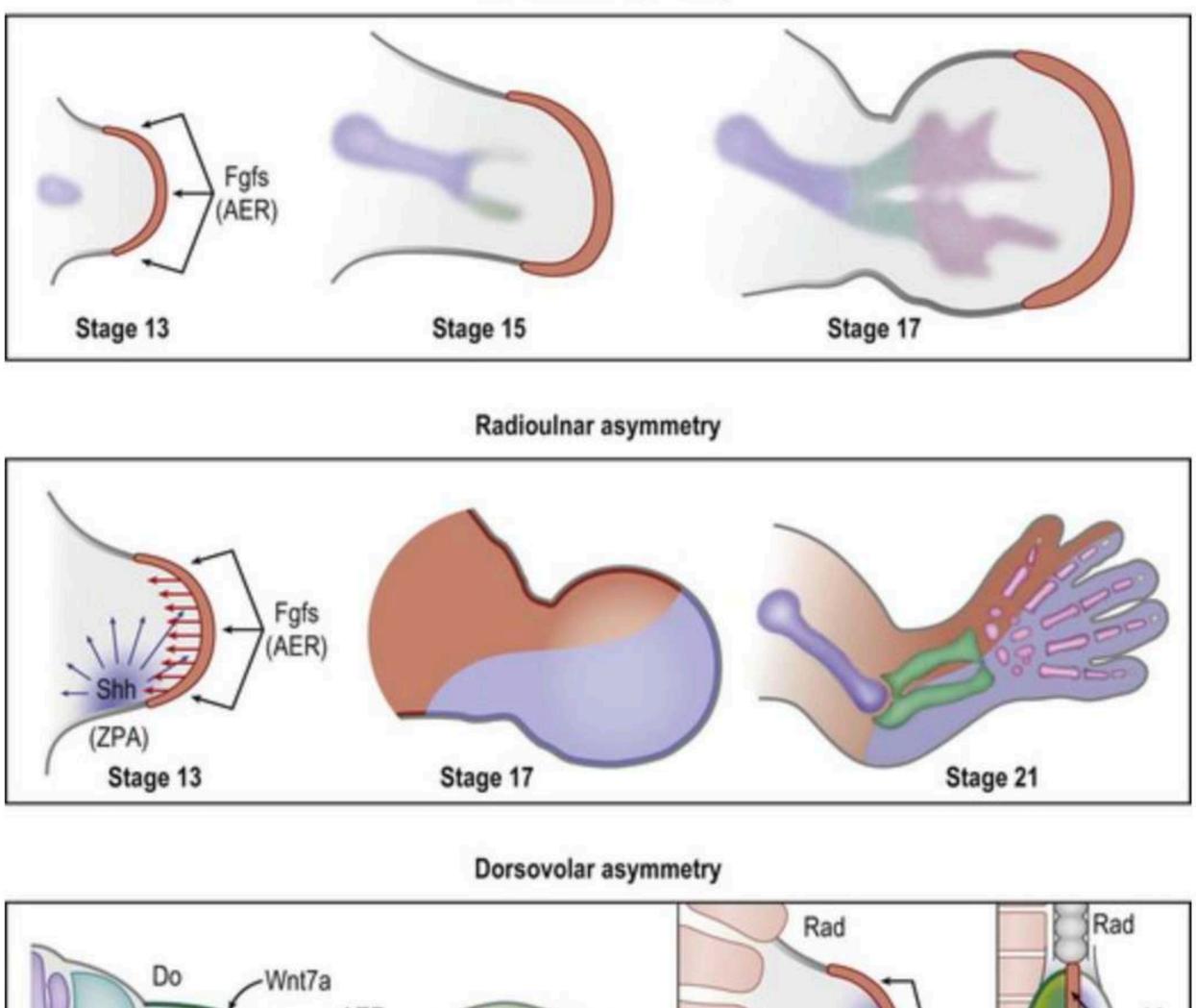
- 5° week
- Onset of development of arm bud 27 days 4° week Well-developed arm bud - 28-30 days Elongation of arm bud - 34-36 days
- Formation of hand paddle 34-38 days
- Onset of finger separation 38-40 days
- Full separation of fingers 50-52 days

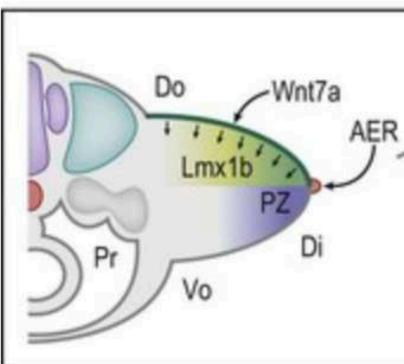




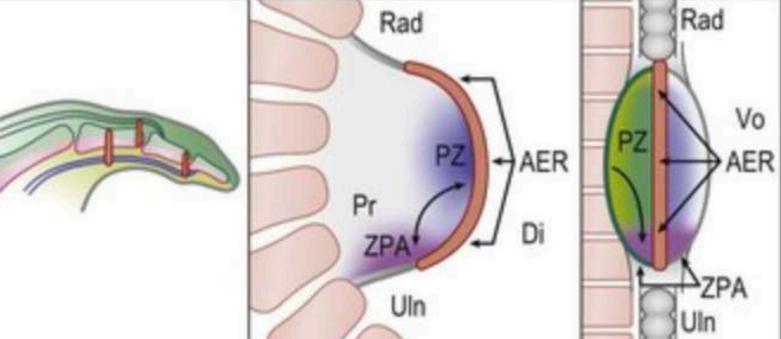








### Proximodistal asymmetry



# SWANSON Classification

Туре	Descript
I	Failure of
II	Failure of
III	Duplicat
IV	Overgro
V	Undergro
VI	Constric
VI	General

Classification of congenital hand deformities (IFSSH).



### tion

of formation of differentiation ation owth rowth ction band syndromes lized anomalies and syndromes

### Malformations

Failure of axis formation/differen

Proximal-distal outgrowth

# Radial-ulnar (anteroposterior)



Dorsal-ventral axis

ntiation:	entire upper limb
	Brachymelia with brachydactyly
	Symbrachydactyly
	Transverse deficiency
	Intersegmental deficiency
r) axis	Radial longitudinal deficiency
	Ulnar longitudinal deficiency
	Ulnar dimelia
	Radioulnar synostosis
	Humero-radial synostosis
	Nail-patella syndrome

# Failure of axis formation/differentiation: handplate

Radial-ulnar (anteroposterior) axis

### Dorsal-ventral axis



- r) axis Radial polydactyly
  - Triphalangeal thumb
  - Ulnar polydactyly
  - Dorsal dimelia (palmar nail)
  - Hypoplastic/aplastic nail

# Failure of handplate formation/di-

### Soft tissue

### Skeletal deficiency

### Complex



lifferent	iation: unspecified axis
	Syndactyly
	Camptodactyly
	Brachydactyly
	Clinodactyly
	Kirner's deformity
	Metacarpal and carpal synostoses
	Cleft hand
	Synpolydactyly
	Apert hand

# Deformations Constriction ring sequence Arthrogryposis Trigger digits Not otherwise specified Dysplasias Hypertrophy Macrodactyly Upper limb Upper limb and macrodactyly **Tumorous conditions**

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VACTERL TAR FANCONI Holt - Oram Poland syndrome Apert syndrome

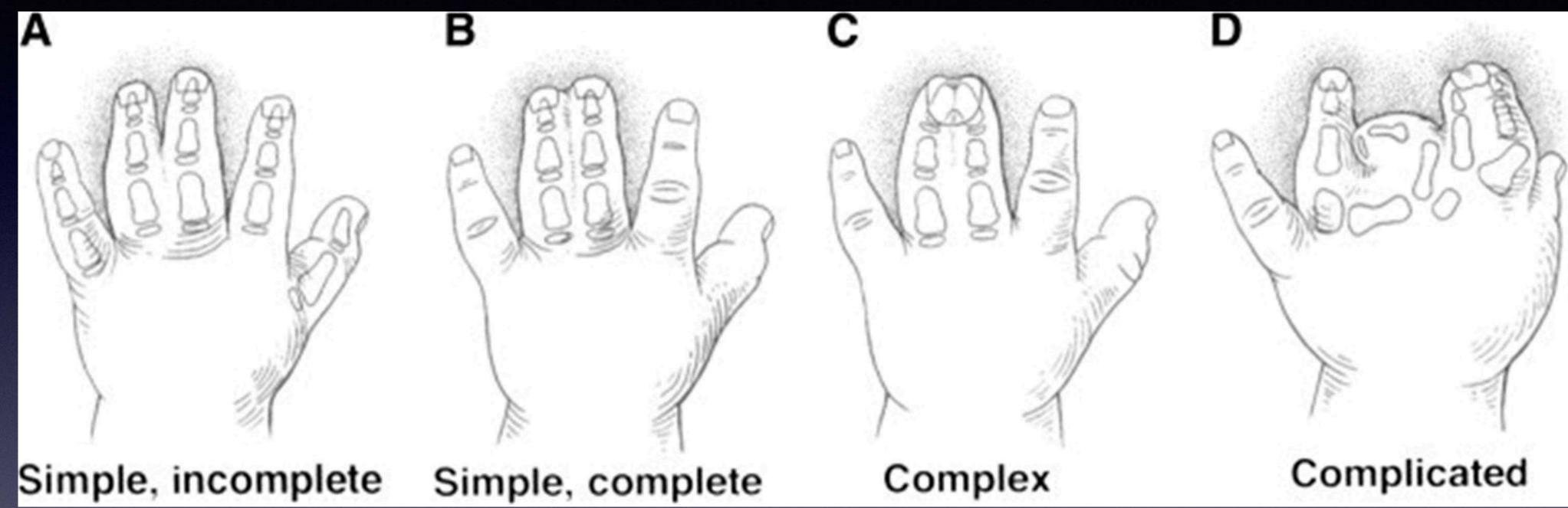


### Syndromes associated:

- Most common
- Failure of apoptosis
- 1 in 2000, M>F
- Familial in 15-40%, autosomal dominant
- Commonest Mid-Ring in 50%
- Associated with other syndromes
- Surgery 12 18 months



### SYNDACTYLY



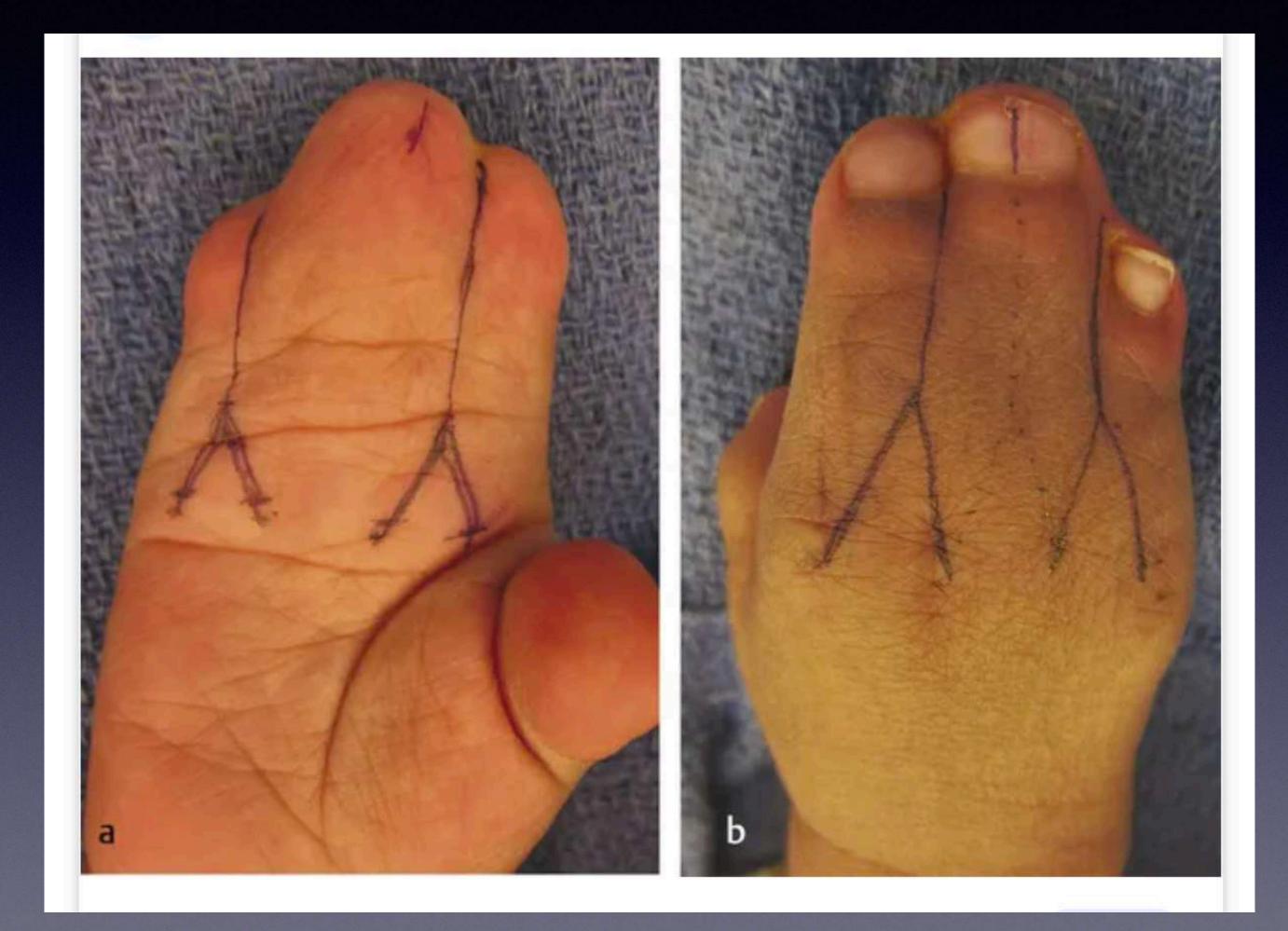


# Principles of surgical release:

- Staged release in case of multiple
- Protection of NV bundle
- Soft tissue and bony release
- Web creation
- Treat lateral soft tissue defects
- Creation of nail folds



### Q. How to manage multiple fingers?

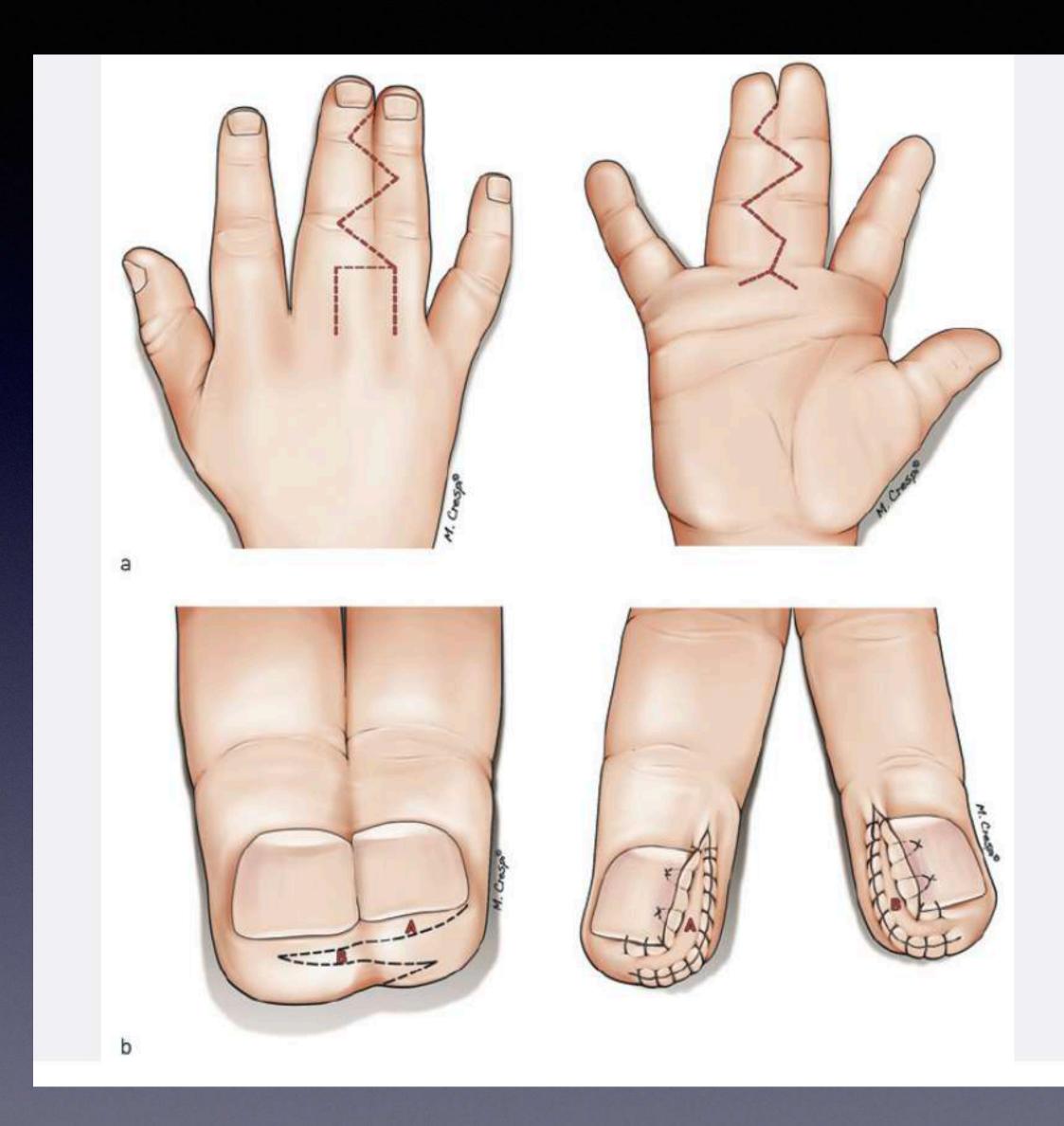




- 2 staged release
- Lateral digits first
- Not to do all adjacent ones together
- Release those with differential growth first
- 6 months gap between
  2 stages

- Release all before school







Dorsal truncated flap Volar anchor/ triangular flap Zigzag flaps Buck Gramcko flaps for nail beds FTSG Most common Cx: Web creep



### Difference between syndactyly & symphalangism?

### Symphalangism

- Longitudinal fusion of phalanges
- same finger
- PIP joint Mx is conservative





### SYNOSTOSIS:

- Metacarpal: common 4th, 5th digit -
- Carpal : Conservative -
- Radio ulnar :
- Present at > 3 years of age
- Excess pronation -



### Compensatory movements at wrist and shoulder

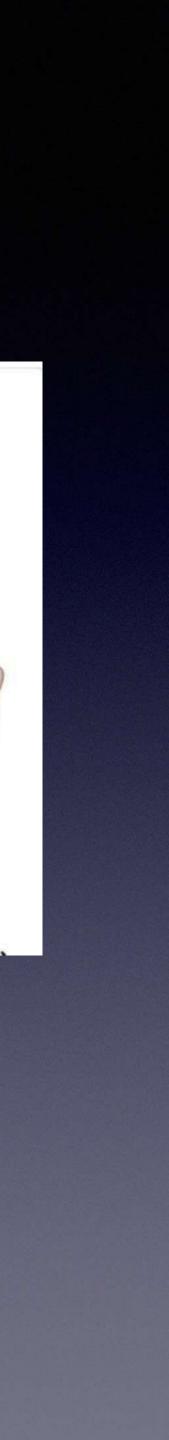
# POLYDACTYLY

### 2nd most common

- Preaxial/ Radial (thumb)
- Postaxial/Ulnar
- (little finger)
- Central



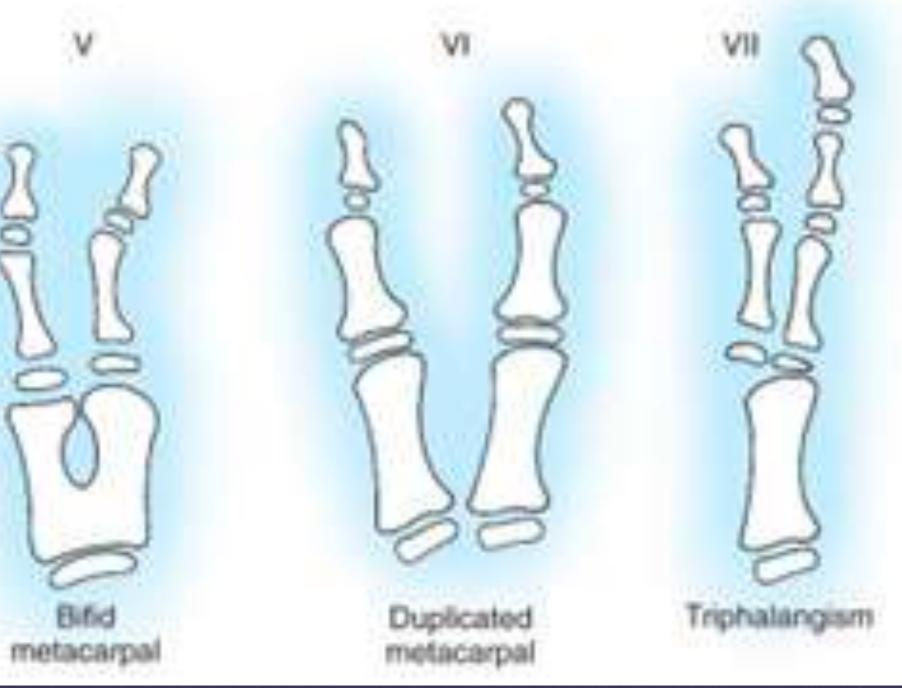
# Types of Polydactyly



IV 11 10 53 **Bitid distal** Duplicated Brid Duplicated proximal phalarix distal phalanx proximal phalanx phalanx

# Type 4 commonest - duplicated proximal phalanx





# WASSEL

### Principles or repair:

- Use most of both
- Balance the soft tissue
- Repair collateral ligament
- Reinsert tendons
- Create sufficient web space
- Cover all articular surfaces



### MIRROR HAND / ULNAR DIMELIA





- -Very rare
- Absence of radial post
- Duplication of ulnar side
- Removal of extra digits
- Creation of web space
- Use the best finger to make a thumb

### TRIPHALANGISM

- Appears as a 5 fingered hand
- Extra phalanx in thumb •
- Extra middle phalanx DELTA phalanx •
- Both IPJ are mobile
- MP unstable, CMC hypoplastic
- Mx Web space, pollicisation, delta phalanx







# CAMPTODACTYLY

 Contracture in PIP in anteroposterior direction

•Little finger

•Splint at birth

•Release of volar tissues





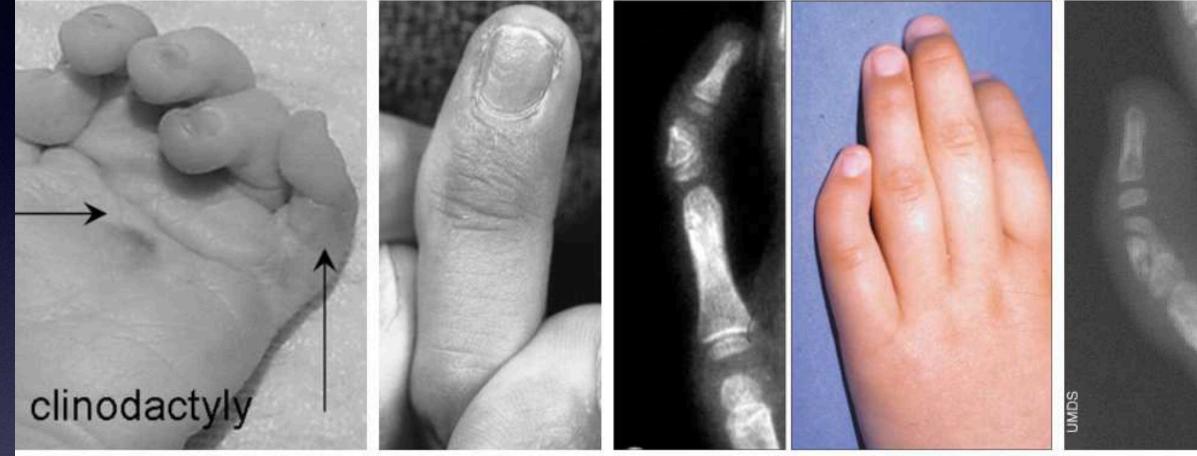




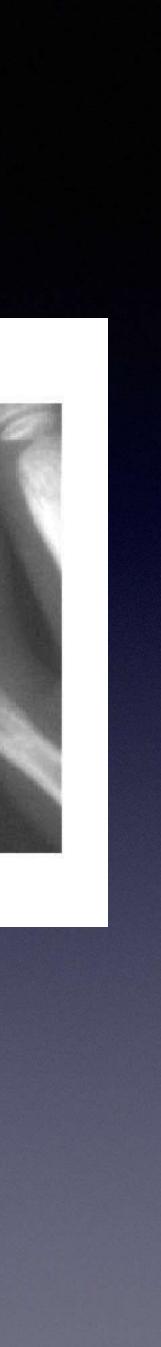
- Abnormal curvature in
- radio-ulnar plane
- Little finger
- Downs syndrome
- Close/open wedge osteotomy



# CLINODACTYLY









### THANK YOU!

- Linkedin Dr. Priyanka Sharma
  - Instagram drps\_plastics
    - Youtube DrPS