

Modified Atasoy V-Y Flap Advancement Technique in Allen Type 3 Fingertip Amputation

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Abstract

Traumatic fingertip amputations are very common reasons for a visit in the Emergency Department. Considering that the finger is our end organ for distal sensation, proprioception and neurosensory discrimination, the suggested treatment should provide function preservation, acceptable sensation, finger length restoration and few potential complications that could lead to poor function of that finger in the future. Actually, there is no defined consensus over the approach that the clinician should take, whether conservative or surgical.

We report the case of a 22-year-old male patient, presented at the Emergency Department of University Trauma Hospital in Tirana after a transverse Allen type 3 ring fingertip amputation.

Bone loss, injury to the nail bed and plate was observed, with no amputated part retrieved.

Considering the patient's demands and rejection of conservative treatment due to longer healing time, we opted for Atasoy V-Y advancement flap with a little modification to the technique, that included a tension free closure at the tip of the donor site. This reduced considerably the chances of partial or full flap necrosis.

The V-Y advancement flap appears to be a safe, reliable and simple technique to be performed in the Emergency Department OR, with very good cosmetic, functional and neurosensory results postoperatively.

We highly suggest that this technique be taken into account for these type of amputations.

Keywords: fingertip, amputation, modified, Atasoy, flap, surgical