

# 胸部後/前X光攝影射線投影的落點與實際運用.

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摘要

## Abstract

**PURPOSE::** Treatment of composite tissue loss in the finger pulp is often difficult. The purpose of this report is to present our experience on using medial plantar artery perforator flap for repair of finger pulp defects and to restore fingertip sensation after traumatic injury. **PATIENTS AND METHODS::** The free medial plantar artery perforator (MPAP) flaps were performed for digital pulp reconstruction in ten patients (eight fingertips and two thumbtips) between June, 2006 and December, 2007. This flap blood supply was perforator vessel of medial plantar artery, which was through the intermuscular septum between the abductor hallucis muscle and the flexor digitorum muscle. The recipient vessels were digital artery and dorsal digital vein. The flap was not reinnervated during transfer procedures. The donor sites were closed primarily in all cases. **RESULTS::** Flap size ranged from 15 x 25 mm to 60 x 20 mm. All flaps were survival. Partial loss occurred in one flap, due to venous congestion caused by excessive stitch tension. The donor sites healed unevenfully in eight cases, but mild wound dehiscence occurred in two cases. The follow-ups ranged from 6 to 29 months with the mean of 18.1 months. The mean of s-2PD and m-2PD were 8.8 mm and 6.8 mm at patients~ last visits, respectively. **CONCLUSION::** MPAP flaps are good in terms of general morbidity, cosmetic results, and durability. This flap is a valuable alternative method of repairing the glabrous finger pulp and tip defects. (c) 2009 Wiley-Liss, Inc. Microsurgery, 2010.