SUMMARY AND CONCLUSION

The aim of this work is to study the secondary tendon revision i.e. the management of tendons which were repaired primarily, delayed for secondary repair under favorable conditions, or undiagnosed as tendon injury and treated by skin sutures only.

The study included 32 patient whose main presentation was flexion deformity in 31% of cases and function defect in 69%. The primary management was skin sutures only, in 56% and primary tendon management in 44% of cases.

According to clinical assessment, and operative findings, the methods of management were tenolysis in 34%, tendon graft in 28%, delayed repair in 19% and secondary repair in 16% pulleys reconstruction only in 3%.

The anaesthesia used was general anaesthesia in 53% and local anesthesia in 47%. The local anesthesia proved to be affective and has some advantages especially in tenolysis.

Concerning the post-operative physiotherapy, the immobilization was used in 37%, early passive mobilization in 35%, early active mobilization in 12%, and no one method proved to be suitable for all

patient, but a combinations was used. In addition new techniques were constructed in 16% of patient according to the patient need.

Concerning the results of secondary tendon revision, they were excellent in 16%, good in 47%, fair in 25% and poor in 12%. The best results and the least complications were observed after flexor tenolysis and one stage tendon graft which gave a conclusion that they are the best methods for secondary tendon revision.

Short term complications occurred in 44% of cases which were managed and did not affect the end results. Long term complications occurred in 28% of cases and were managed accordingly.

The results of this study were compared with the results of other investigators. There is an agreement between the tendon surgery results in this study and other studies. In addition, in this study two new skin incision were arranged, four new methods of post-operative physiotherapy were used and some operative findings and clinical observations were observed and recorded in the procedures used.