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In this study, we used following microsurgical technique which eliminates problems of immune response during graft-versus-host disease: (1) the local perfusion of $0.2 \%$ Fluosol to increase the oxygen transport capacity of the transplantation medium; (2) the intraluminal administration of hormones to preserve and protect mucosa-associated epithelia after surgery; and (3) the modification of the surgical technique to eliminate injury of muscle, fascia, and ligaments. Microsurgical techniques were applied to 18 cadaver thighs to harvest the musculocutaneous and vastus lateralis-venae comites gracilis flaps and to connect the flaps with the sciatic nerve. The donor site was closed with
1.5 cm of overlapping skin. The recipient site was debrided and saline irrigation was performed prior to microvascular anastomosis. In all cases, the extent of the healthy muscle flap was 10 to 12 cm in length. The flap viability was assessed at 5 minutes, 5 days, and 10 days postoperatively. In all cases, the normal muscle tissues were filled with muscle cells. The flow to the grafts was rapid, and no clot formation was detected in the circulatory system. We concluded that our muscle flap procedure may be applicable to musculocutaneous and vastus lateralis-venae comites gracilis flaps of adult cadavers. $74 \pm 0.150 .51 \pm 0.08^{\wedge}$ <br>\#^ $0.43 \pm 0.06^{\wedge}$ <br>\#^ TG/HDL-C 0cc13bf012

## Distal radius fractures are usually caused by highenergy trauma in old patients with osteoporosis and/or soft tissue injuries. The aim of this study was to assess the outcome of all patients aged 50 years or more who underwent ORIF using a volar locking plate for distal radius fractures. All consecutive patients included in the cohort were included. Demographic data were collected and patients were followed. Radiographs were analysed with regard to: characteristics of the fracture, type of implants used, complications and outcome. We followed a total of 55 patients (60

radioulnar joints). Mean follow-up was 30.2 months. According to AO classification, there were 30 type C2 and 30 type C3 fractures. Analysis of
radiographic parameters revealed that all
radioulnar units were in an acceptable position, the average shortening was 2.5 mm (range: 0-10 mm ), the mean gain in range of motion was $32^{\circ}$ (range: $10-100^{\circ}$ ), and the mean grip strength was

79\%. According to the modified American Shoulder and Elbow Surgeons (ASES) evaluation, the average score for pain was 82 and for range of motion 97 . None of the patients had a clinically relevant impairment of their grip strength. The final score of the patients ranged from 14 to 100. The average final score of patients with type C3
fractures was 11 points lower than the one of patients with type C2 fractures. According to our study, the outcome of patients undergoing ORIF
using a volar locking plate for distal radius fractures was very good. In patients with C3 type fractures, a worse outcome was found. To test this finding, future studies with larger samples should be performed. Gripping. Nombre Completo De
Persona Posada Como Nombre Completo De Ectabula Perfil Genere Torneo Dectabula Torneo Dectabula General Resume Torneo Dectabula Actual Torneo Dectabula Deseo Torneo Dectabula

# Parametros Torneo Dectabula Lista Torneo Dectabula Modificar Torneo Dectabula Campo Torneo Dectabula Retorno Torneo Dectabula Notificar Completa Torneo Dectabula Completar Torneo Dectabula Modificar La canasta 

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