피판의 평균 9.2mm의 이점심별력 보다 상당히 우수한 6.4mm의 이점식별력을 보였다.

#### 결론

수지와 수부의 역혈행성 도서형 감각피판은 유용하고 우수한 피판으로 안전하게 널리 이용될 수 있는 피판이라고 사료된다.

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## No. 3.

# Wrap around flap을 이용한 수무지 재건술

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무지는 수부에서 가장 중요한 역할을 하는 부위로 그 손실은 심각한 기능상의 결함을 갖게 한다. 무지 재건의 목표는 길이와 감각 및 외관의 회복이며 여러가지 다양한 술식이 사용되고 있다.

저자들은 1983년 1월부터 1994년 6월까지 무지의 손상을 입은 10명의 환자에서 wrap around flap을 시행하여 8개월에서 5년 2개월까지 평균 23개월간 추시하였다.

정맥혈전으로 실패한 1례를 제외한 9례에서 피판이 생존하였으며, 이식골 감염 1례, 피판 피부주변부 부분괴사 2례, 골흡수 2례 등의 합병증이 있었으나 생존한 예에서는 기능 및 의관이 양호하였다.

## No. 4.

# 도서 피판술을 이용한 수부 재건술

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수부에 발생한 연부 조직 손상, 특히 무지와 시지와 같이 감각 신경의 기능이 필수적인 곳에 발생한 경우

6. Kwon TK, Cha JH, Kim YW: Finger tip reconstruction with reverse digital artery island flap the long term result. Korean J Plast Reconst Surg, 22:622, 1995.

### No. 3.

# Free Wrap-Around Flap for Thumb Reconstruction

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The thumb is the most important part in hand function, and loss of a thumb constitutes a major deficit.

Numerous methods are currently available for reconstruction of the amputated thumb. The ideal goal is to restore length, provide sensibility and be aesthetically acceptable.

From January, 1983 to July, 1994, we performed the wrap around flap for reconstruction of the thumb in ten patients with average follow-up of 23 months. All flaps survived except one case which failed due to venous thrombosis. There were several complications; thee included graft bone infection (1), marginal flap skin necrosis (2), bone resorption (2).

The results were good functionally and cosmetically in all survived cases.

## No. 4.

### **Neurovascular Island Graft for Hand Reconstruction**

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In the soft tissue defect of the hand, especially on the thumb and index finger where sensory is essential, it needs reconstruction of neurovascular bundle as well as skin and soft tissue. Neurovascular island graft has been usually used for these purposes. This method can restore the sensation of the volar surface of the thumb and replace pulp tissues avulsed from thumb and index finger. Especially in early phase of replantation, it helps to preserve the minimal function of thumb by neurovascular island graft or local rotational flap after debridement of necrotic tissue.

Authors performed neurovascular island graft in 31 cases since June 1979 to Aug. 1995. The restoration of sensibility to localized areas of the hand was done by means of a volar heterodigital neurovascular island graft from the ulnar side of ring finger in 21 cases and middle finger in 10 cases. The average follow up period was 8 years and 2 months. The recovery of protective sensation such as sharp/blunt discrimination, touch/stroke discrimination, temperature discrimination were satisfactory in most cases, but the recovery of two point discrimination and reorientation of sensation needed long time follow up. As complications, longitudinal linear scar band of donor digit were developed except for 8 cases. To prevent these complications, adequate location of skin incision and sufficient skin graft for donor site is important.