

Evaluation of Iatrogenic Lesions in 722 Surgically Treated Cases of Peripheral Nerve Trauma

Content

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OBJECT: The purpose of this study was to discover the number and types of iatrogenic nerve injuries that were surgically treated during a 9-year period at a relatively busy nerve center. The specific nerves involved, their sites of injury, and the mechanisms of injury were also documented.

METHODS: The authors retrospectively evaluated the surgically treated iatrogenic lesions by reviewing case histories, operative reports, and follow-up notes in 722 cases of trauma. These cases were treated between January 1990 and December 1998 because of pain, dysesthesias, and sensory and/or motor deficits. Iatrogenic injury was a much larger category of trauma than predicted. One hundred twenty-six (17.4%) of the 722 surgically treated cases were iatrogenic in origin. Most of these injuries occurred during a previous operation. To a major extent, nerves of the extremities were affected, and a relatively large number of injuries occurred in the neck and groin. Incidence was highest in the spinal accessory nerve (14 cases), the common peroneal nerve (11 cases), the superficial radial nerve (10 cases), the genitofemoral nerve branches (10 cases), and the median nerve (nine cases). At least two thirds of the patients did not undergo surgery for the iatrogenic injury within an optimal time interval due to delayed referral. Follow-up data were available in 97 of the 126 patients. Surgical outcomes demonstrated improvement in 70% of patients. Operative results were especially favorable in patients suffering from iatrogenic injuries to the accessory and superficial sensory radial nerves.

CONCLUSIONS: Iatrogenic injuries should be corrected in a timely fashion just like any other traumatic injury to nerve.

COMMENT IN: Iatrogenic peripheral nerve injuries. [*Curr Surg.* 2005] Iatrogenic peripheral nerve injuries. *Winfrey CJ. Curr Surg.* 2005 May-Jun; 62(3):283-8. PMID: 11409518 [PubMed – indexed for MEDLINE]