

**LA PARALYSIE
OBSTETRICALE
DU PLEXUS BRACHIAL**

**C. ROMAÑA
HOPITAL TROUSSEAU
PARIS**



--> **FREQUENCE (GILBERT)**

1000 CAS PAR AN en France

--> **ERB 1874**

« MANIPULATION ENERGIQUE DU FŒTUS

EN VUE DE SON DEGAGEMENT »

--> **HYPOTHESES MALFORMATIVES, VASCULAIRES,**

FACTEURS FAVORISANTS

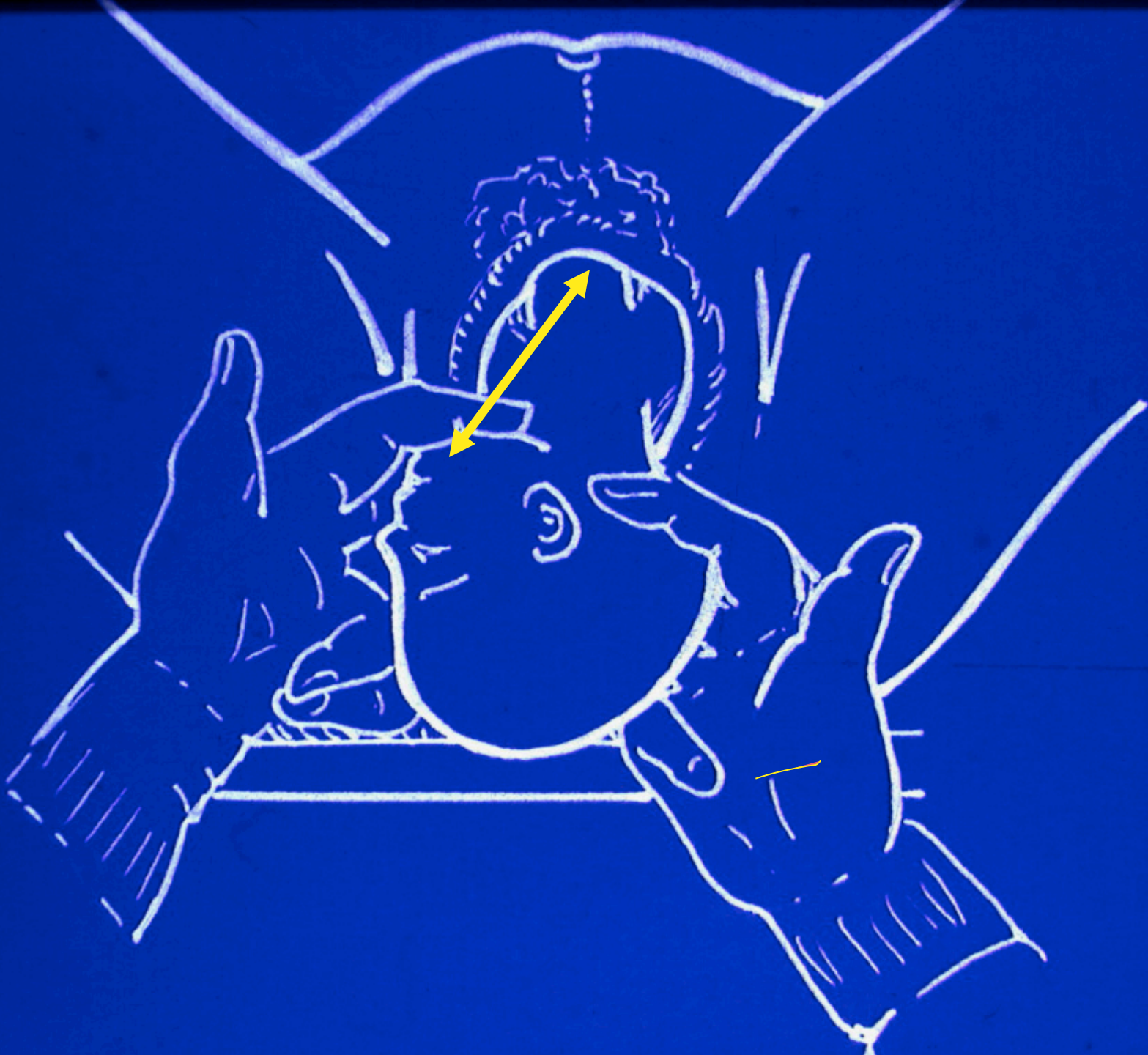
- GROS BEBES**
- MERES OBESES**
- DYSTOCIE DES EPAULES**
- PRESENTATION SIEGE**
- ACC. PROLONGE**
- PREMATURITE**

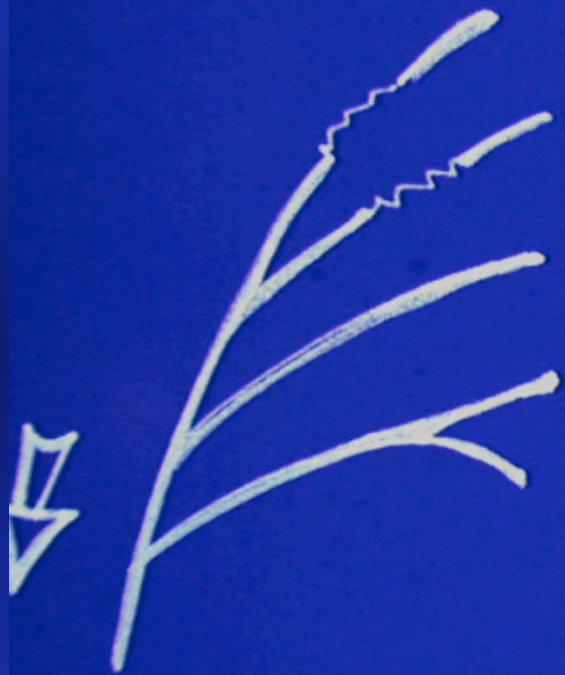




TROIS TYPES

- DYSTOCIE DES EPAULES**
- BRAS ET TETE DERNIERE**
 - BRAS PREMIER**







TABLEAUX CLINIQUES

- PARALYSIE COMPLETE

C5 C6 C7 C8 ET D1

- PARALYSIE PROXIMALE

C5 C6 + C7+ C8

DIFFERENCE MAJEURE : LA MAIN

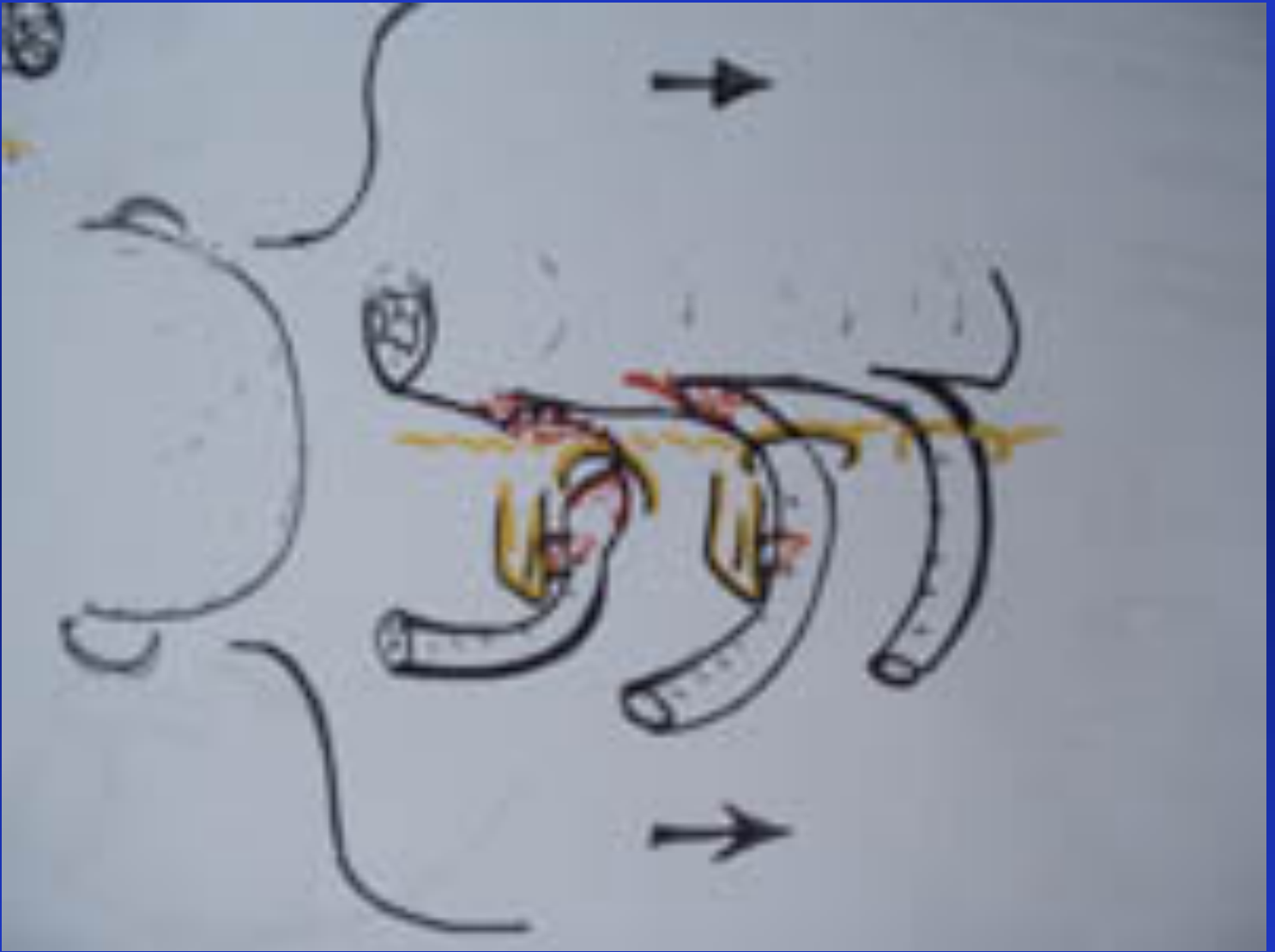
SIGNES PEJORATIFS:

- SIGNE DE CL. BERNARD-HORNER
- PARALYSIE DU NERF PHRENIQUE

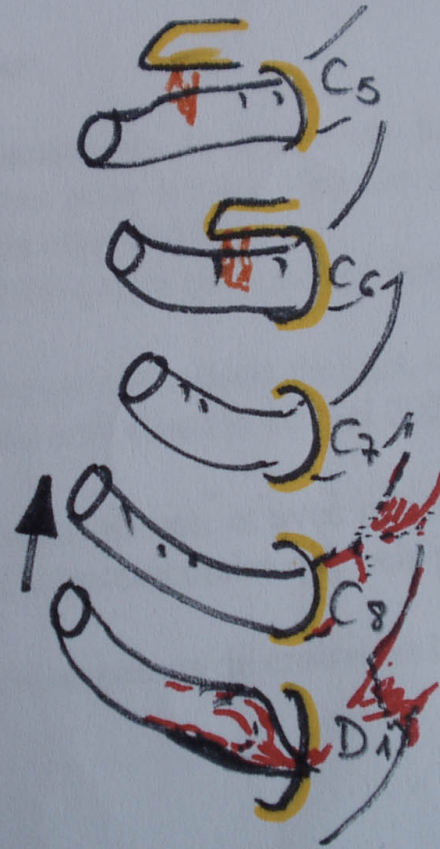












KLUMPKE-DJERINE

- SOUFFRANCE FŒTALE
- >CESARIENNE
- > PARALYSIE POIGNET-MAIN
- RACINES BASSES C8-D1



TRAITEMENT

1^{er} MOIS :

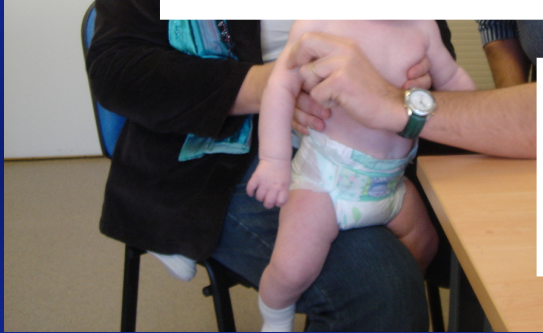
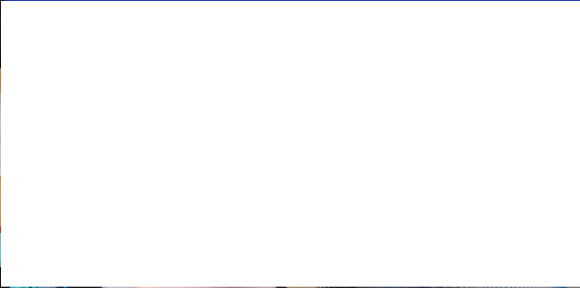
ABSTENTION → DOULEUR

2^{ème} MOIS :

REEDUCATION

- **MAINTENIR LA MOBILITE PASSIVE**
- **STIMULER**

CLINIQUE +++



INDICATION OPERATOIRE

3^{ème} MOIS

→ PARALYSIE C8 -D1

→ BICEPS < 3

- THESE DE TASSIN - GILBERT

- * HISTOIRE NATURELLE

- * EXPLORATION - GREFFE

- DIFFERENCE STATISTIQUE MAJEURE

- FORCE : GAIN 1 POINT

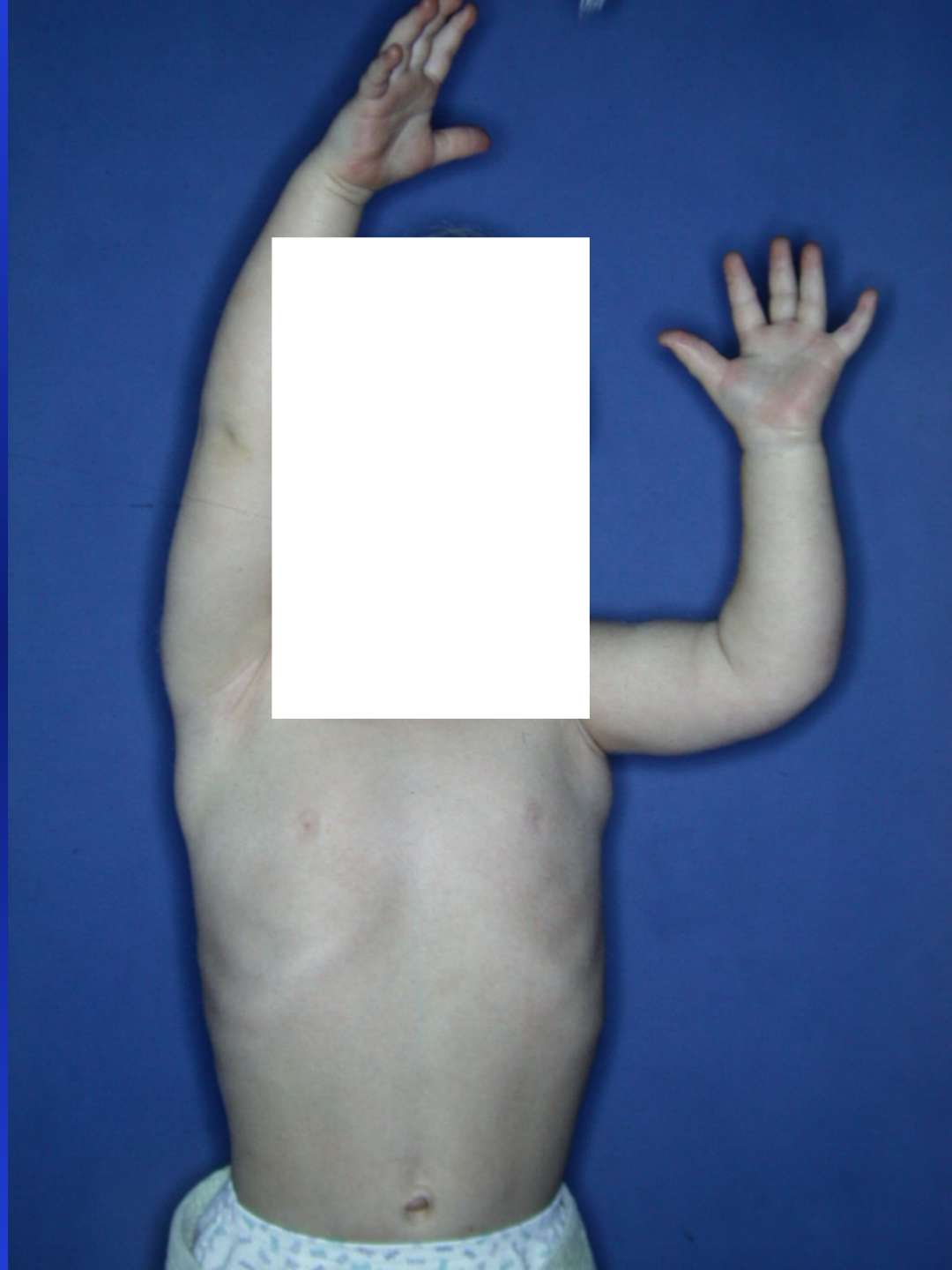
- ERREUR D'AIGUILLAGE







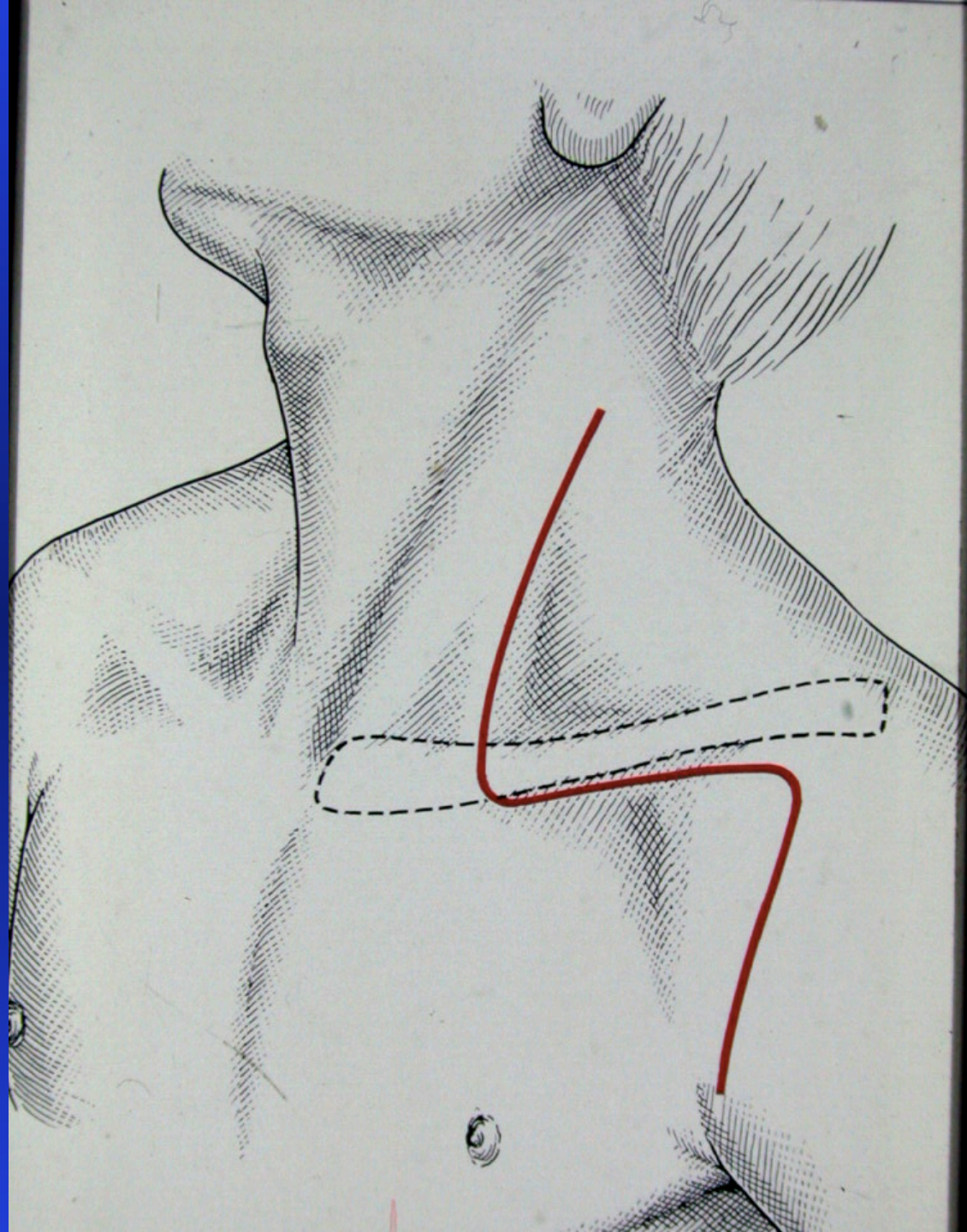


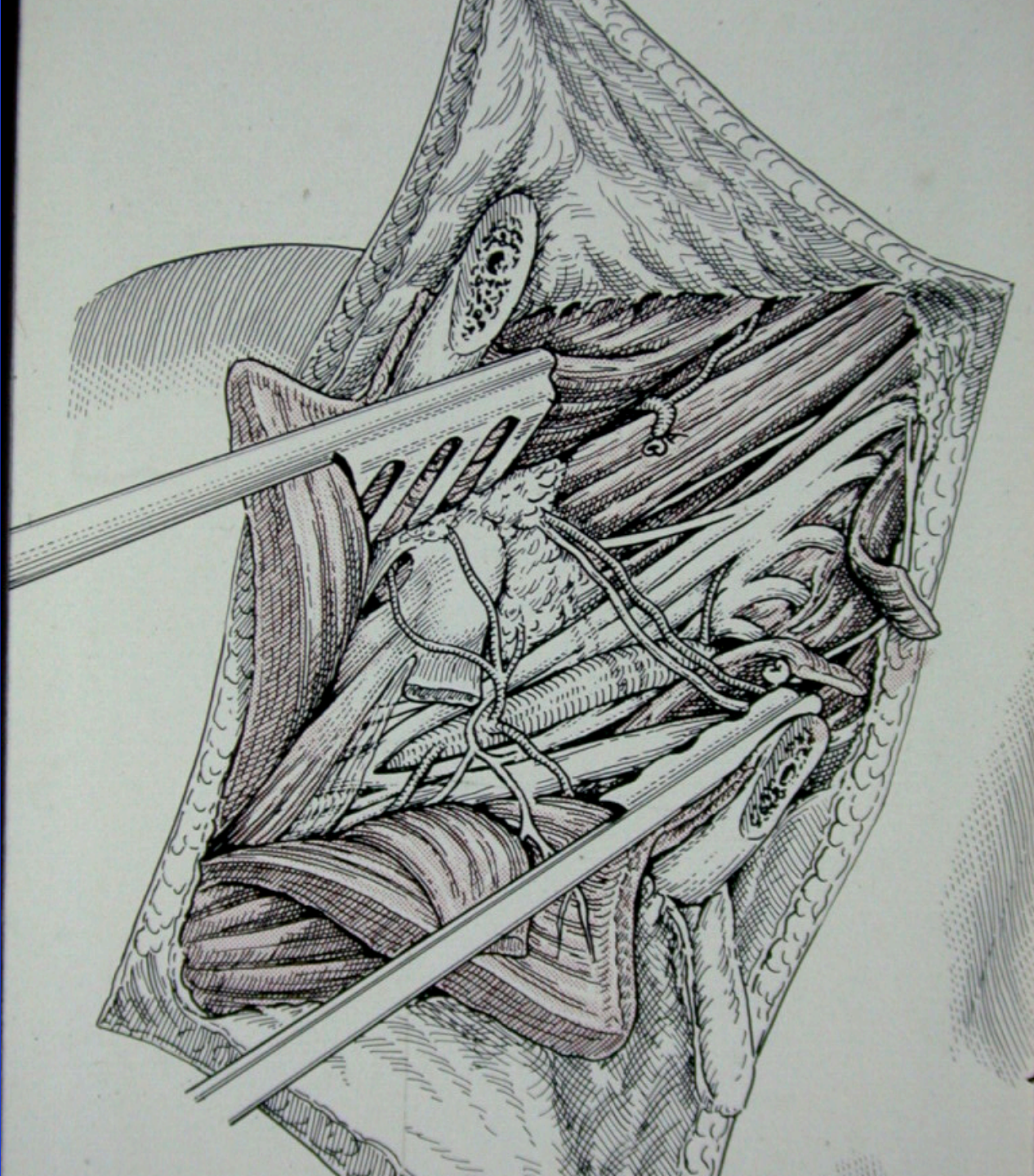


PRIORITES

- **C5 - D1 :**
MAIN UTILE
FLEXION COUDE
STABILITE EPAULE
- **C5 - C6 - C7 :**
RECONSTRUCTION
AD INTEGRUM

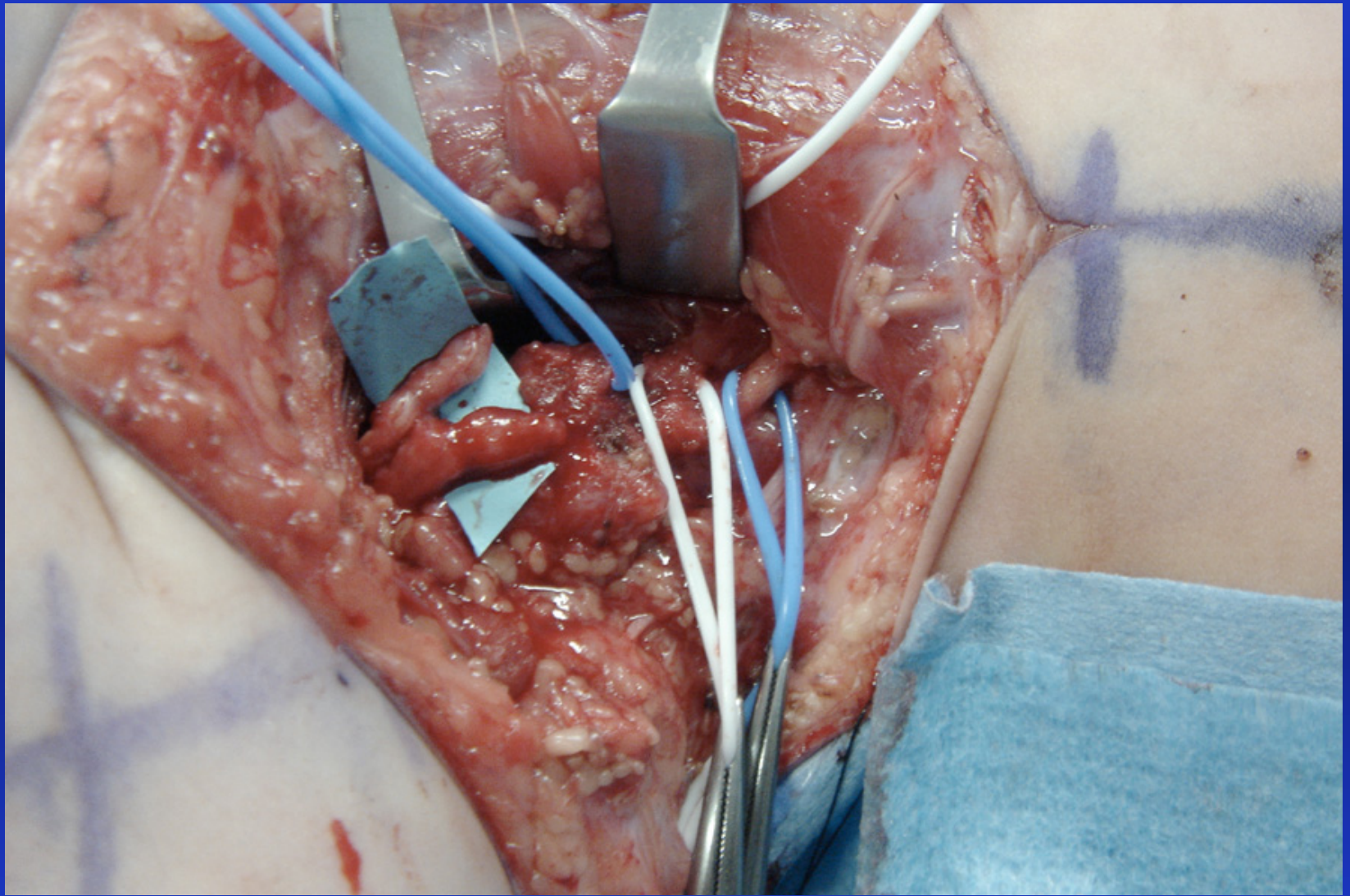


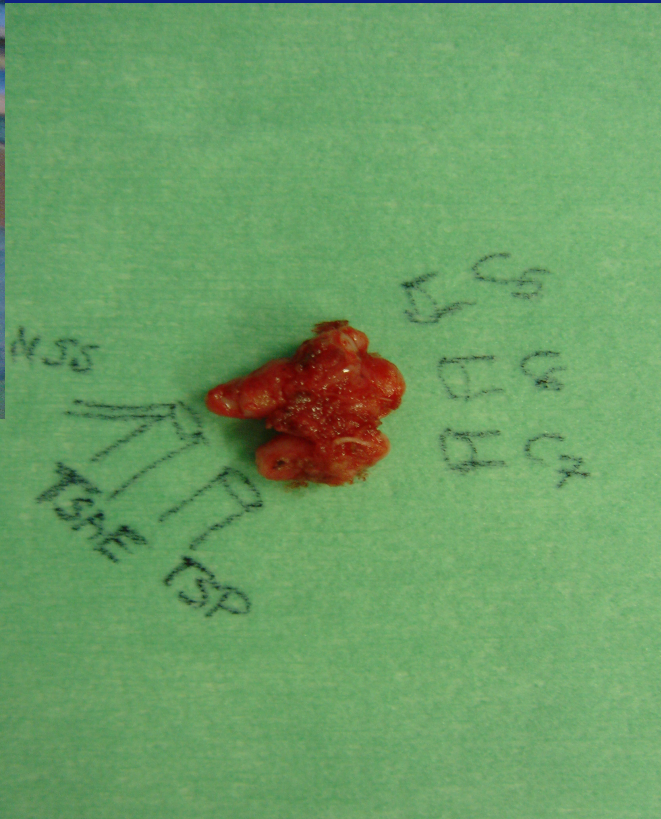
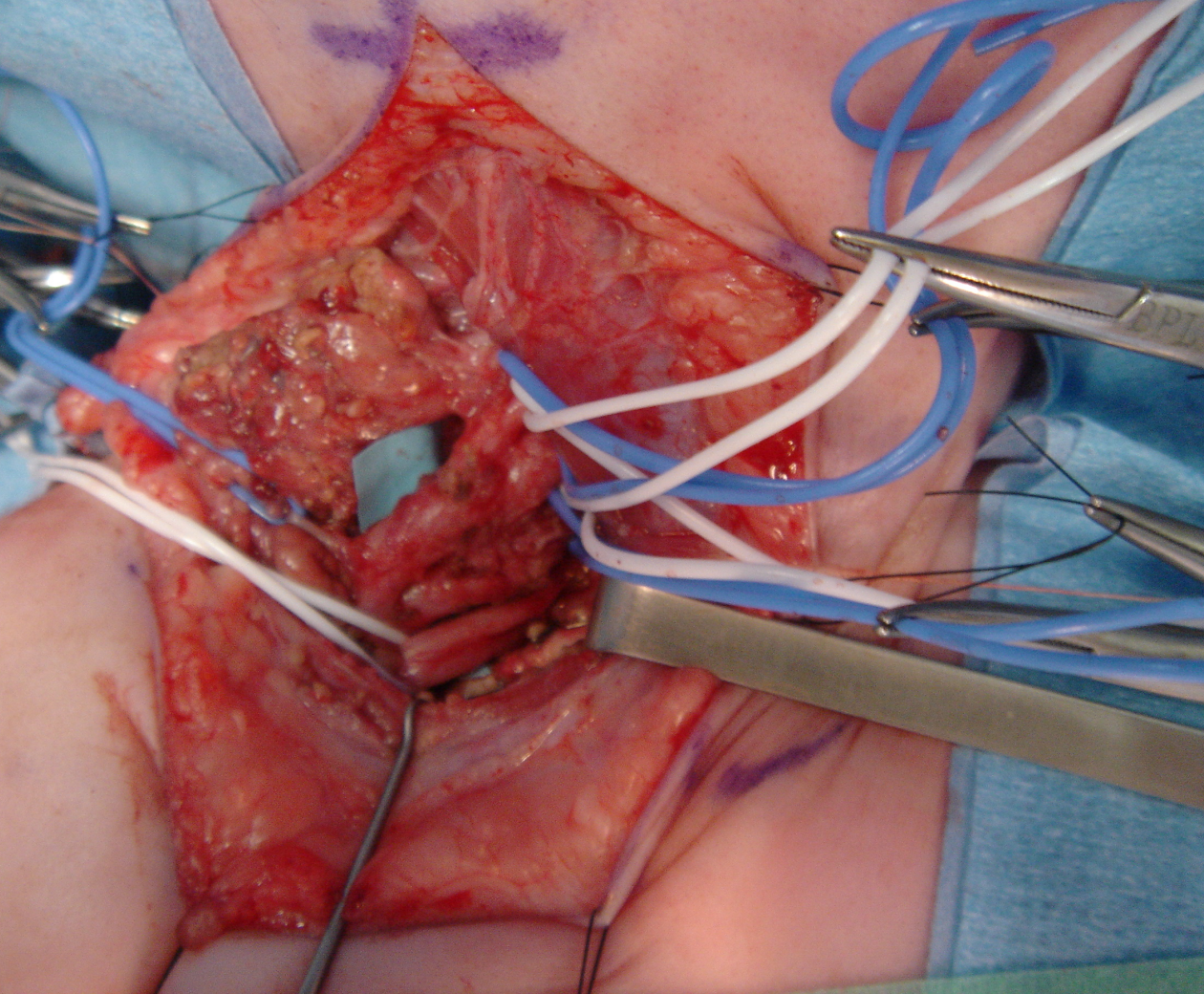


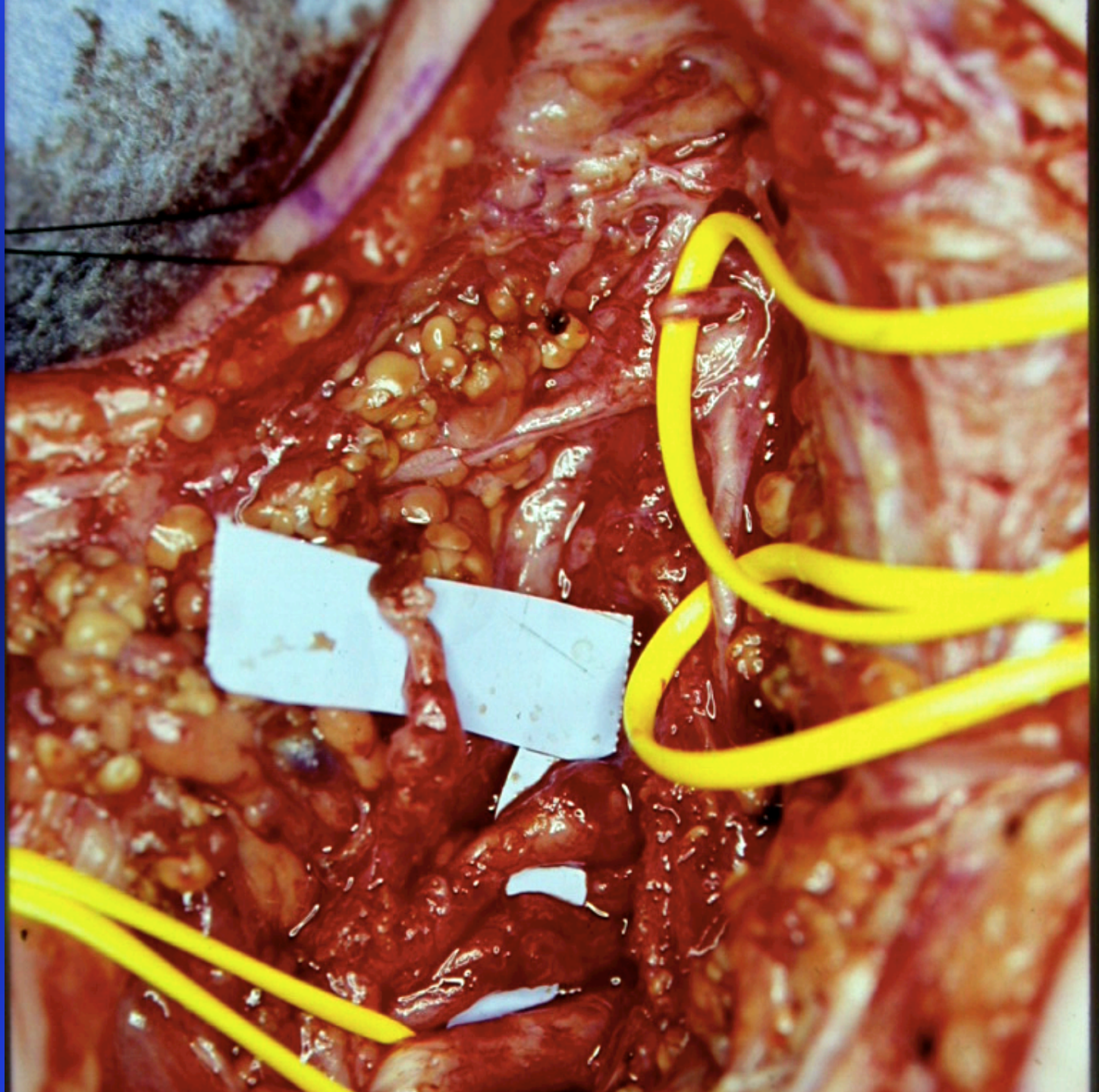


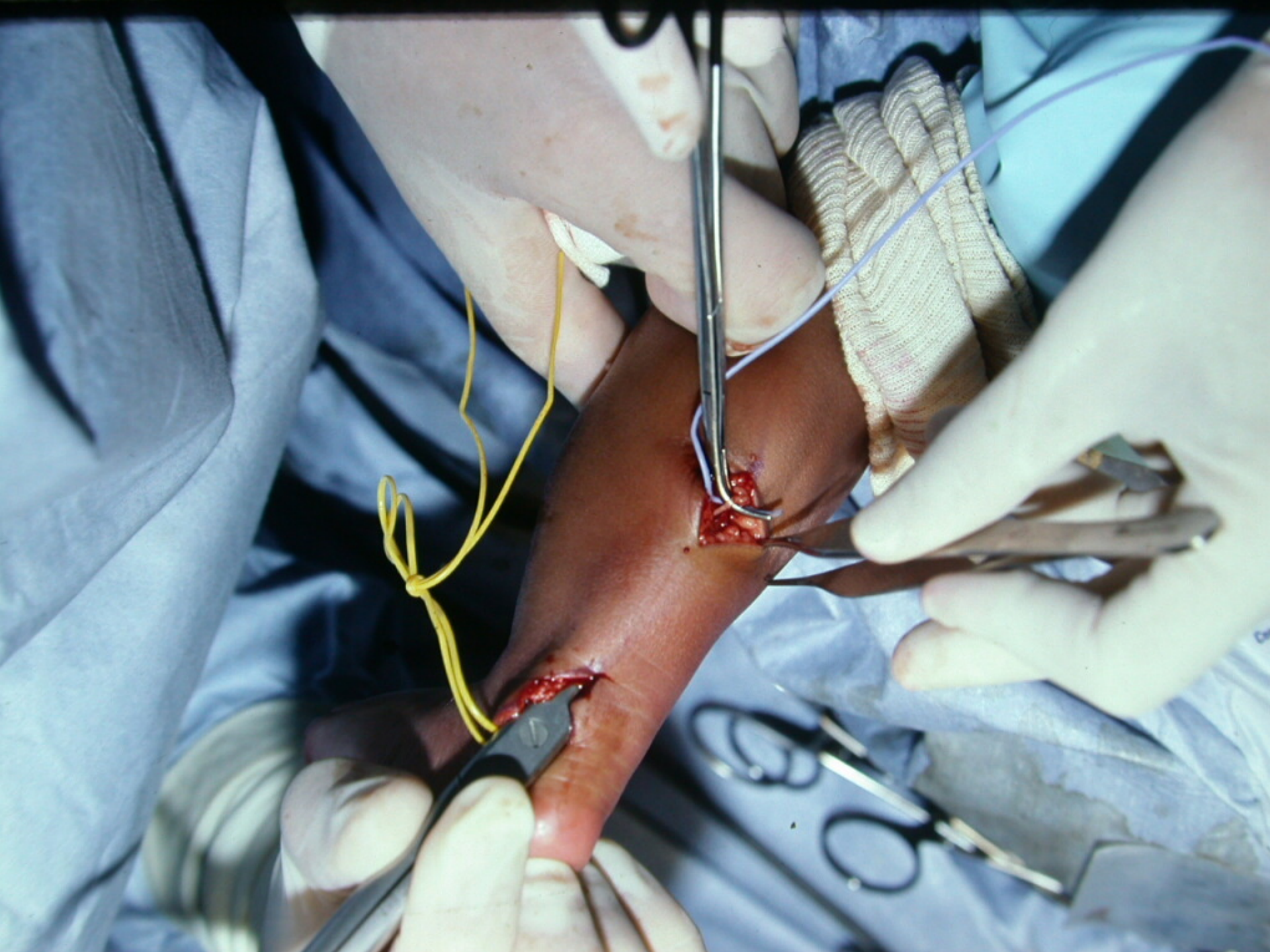
- **EXPLORATION :**
RECONNAISSANCE DES LESIONS

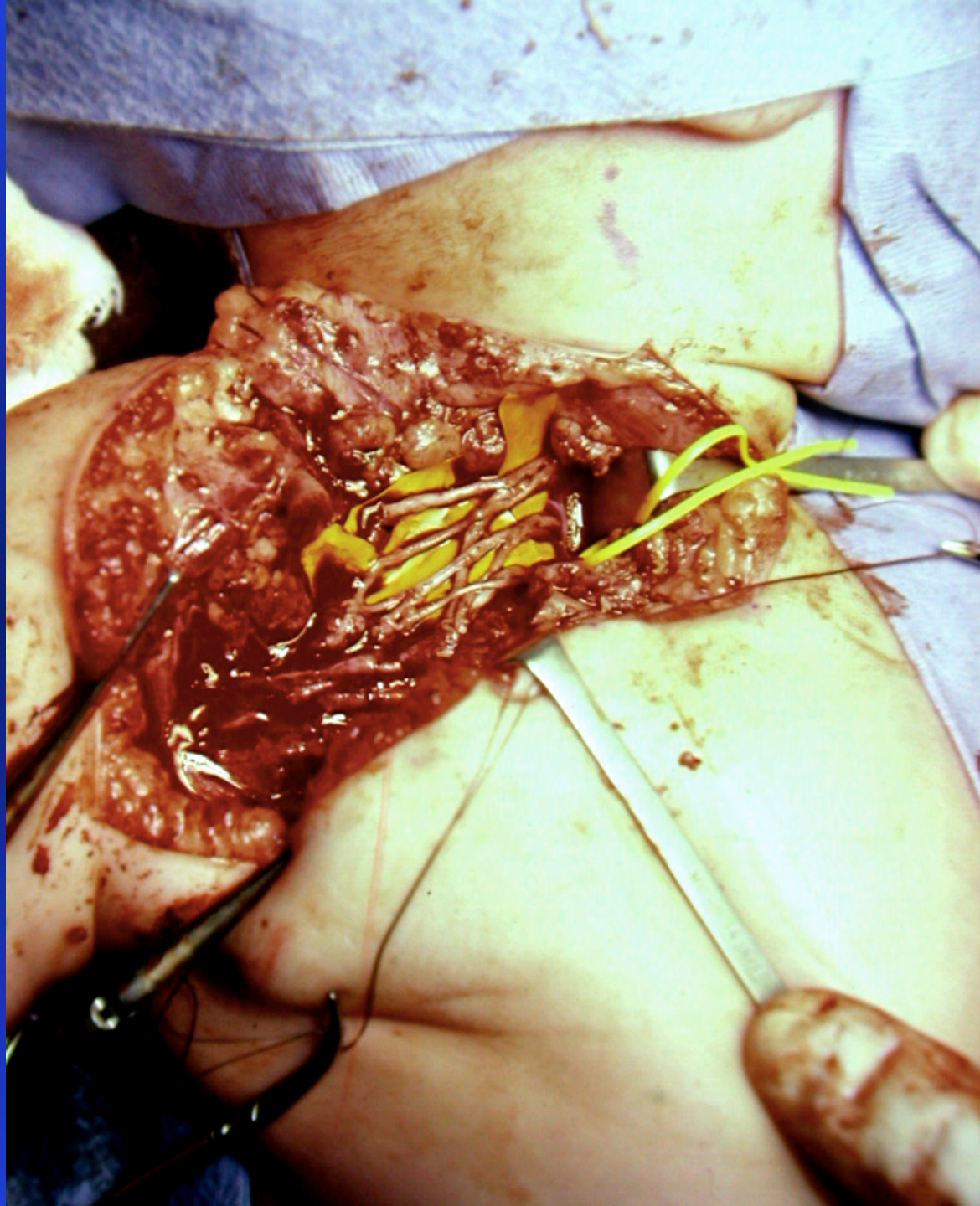
- **GREFFE :**
STRATEGIE DE REPARATION
➡ PRIORITES
 - **MAIN**
 - **FLEXION DU COUDE**
 - **STABILITE DE L'EPAULE**







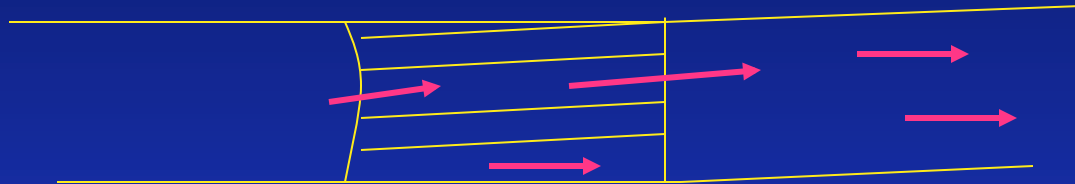




RECUPERATION

- EPAULE , BICEPS

-----> MAIN



RECUPERATION JUSQU' A 3-4 ANS

- **REEDUCATION**
- **CHIRURGIE DES ATTITUDES
VICIEUSES**







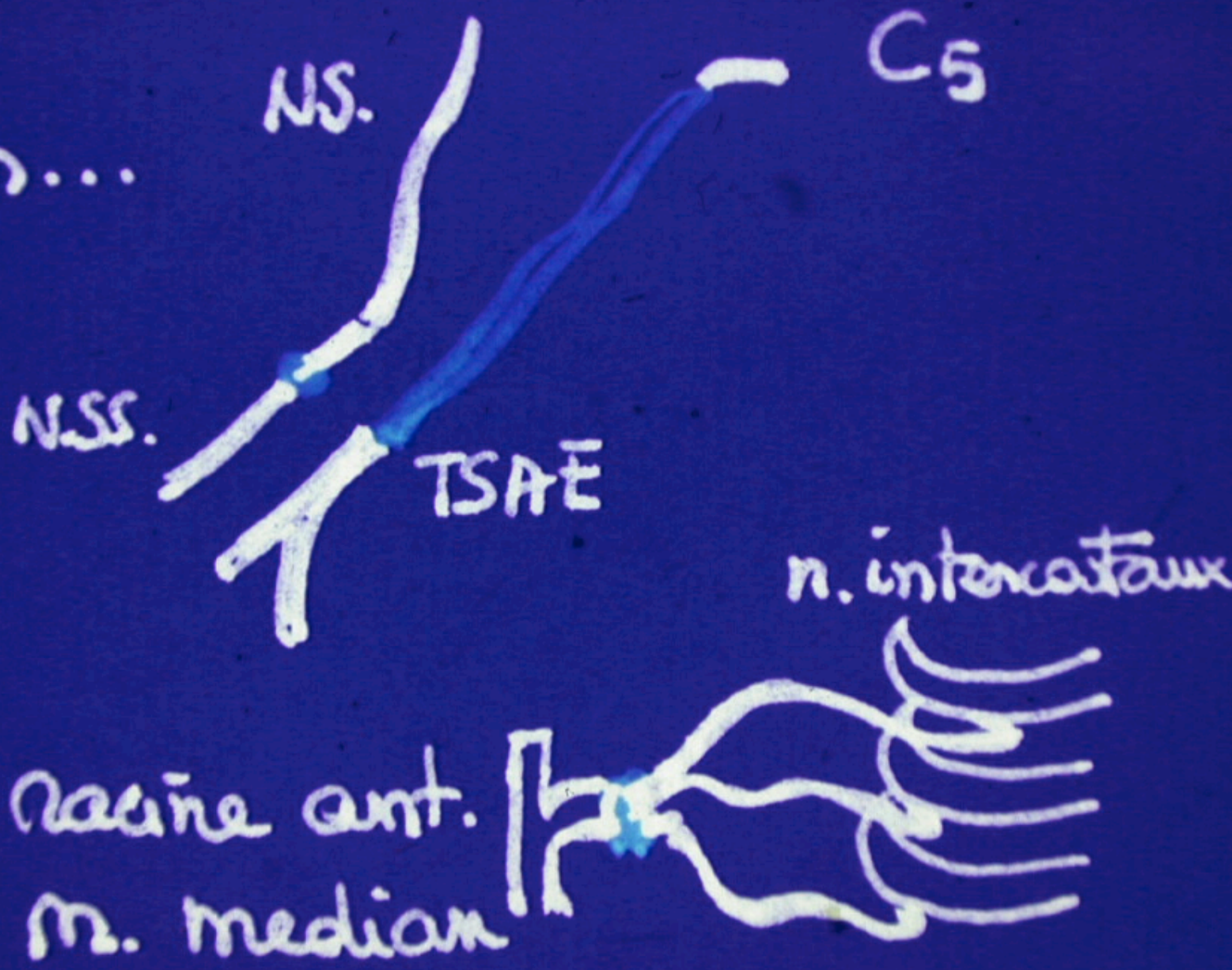


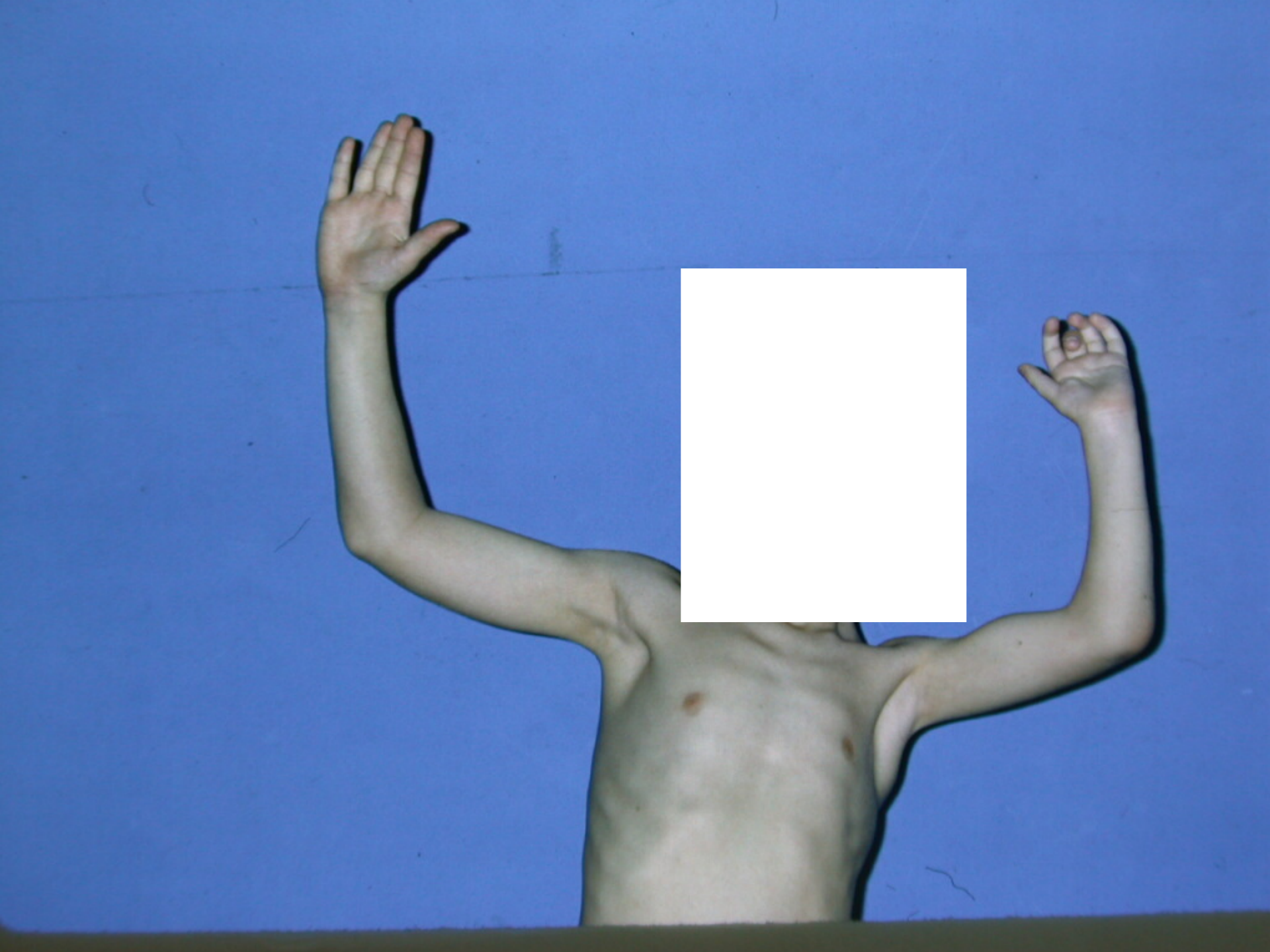






De Am...





Main sensible

Membre superieur d'appoint





Date de naissance :

NIP : 4502030653

Operateur(s) : Dr ROMANA

Assistant : Dr

Anesthésiste : Dr

Date : 26 mars 2003

Paralysie obstétricale du plexus brachial C3 D1.

AG. DD sur billot.

Incision suivant le SCM et la clavicule puis le sillon delto-pectoral.

Ostéotomie de la clavicule.

Neurolyse du nerf phrénique.

On retrouve C5 et C6 dans un volumineux névrome.

C7, C8 et D1 sont arrachées.

Grefe nerveuse : C5 – C8 (4 torons)

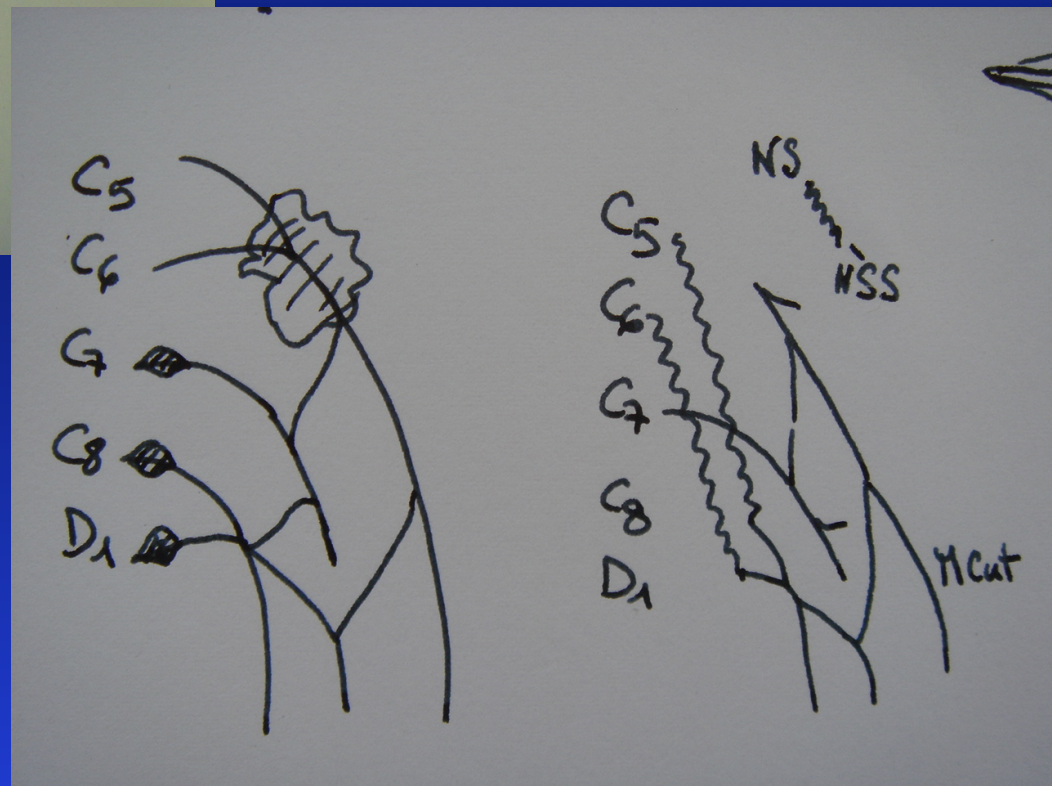
C6 – D1 (3 torons)

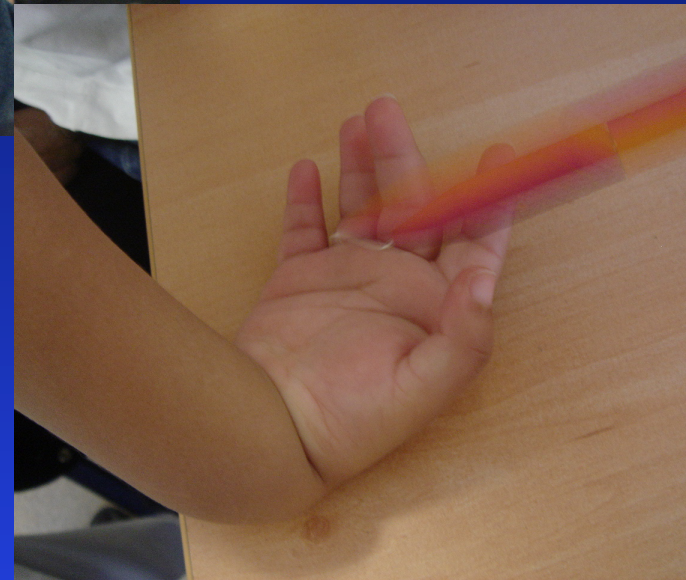
C6 – musculo-cutané (1 toron).

Neurotisation du nerf sus-scapulaire par le nerf spinal.

Fermeture en 2 plans après synthèse de la clavicule.

3022





TRAITEMENT DES SEQUELLES

- PARALYSIE
- CROISSANCE

POURQUOI ?

AGONISTE ### **ANTAGONISTE**

TRAITEMENT DES SEQUELLES

1. CORRIGER ATTITUDES VICIEUSES

2. REANIMER OU AUGMENTER

FONCTION DEFICITAIRE

3. ACOMPAGNER ENFANT ET FAMILLE

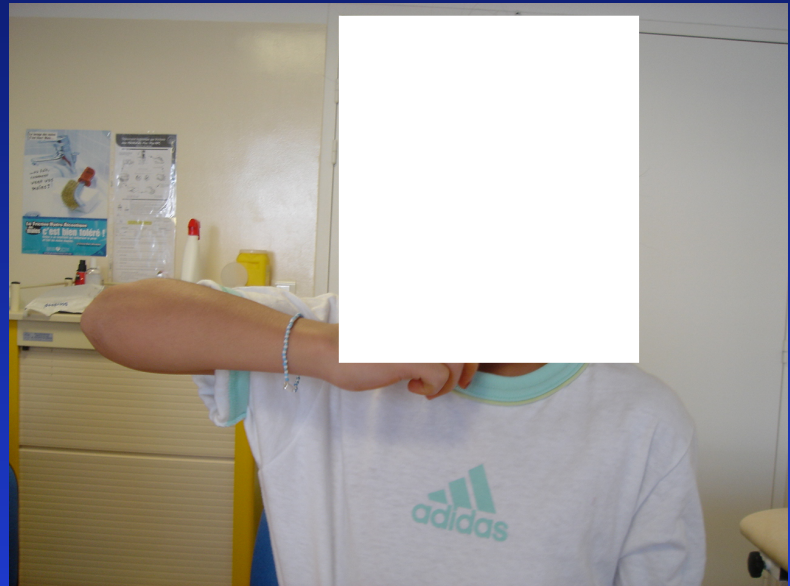
CORRIGER ATTITUDES VICIEUSES

- **ROTATION INTERNE D'ÉPAULE**
- **FLEXUM DU COUDE**
- **SUPINATION AVANT-BRAS**

KINESITHERAPIE

ORTHESES ?

PLATRES





DEFAUT DE ROTATION EXTERNE

1. TETE RONDE :

- TOXINE BOTULINIQUE

- LIBERATION M. SUSCAPULAIRE

 - +/- G. DORSAL

2. ENCOCHE :

- OST. DEROTATION +/- G. DORSAL

- OST. DEROTATION







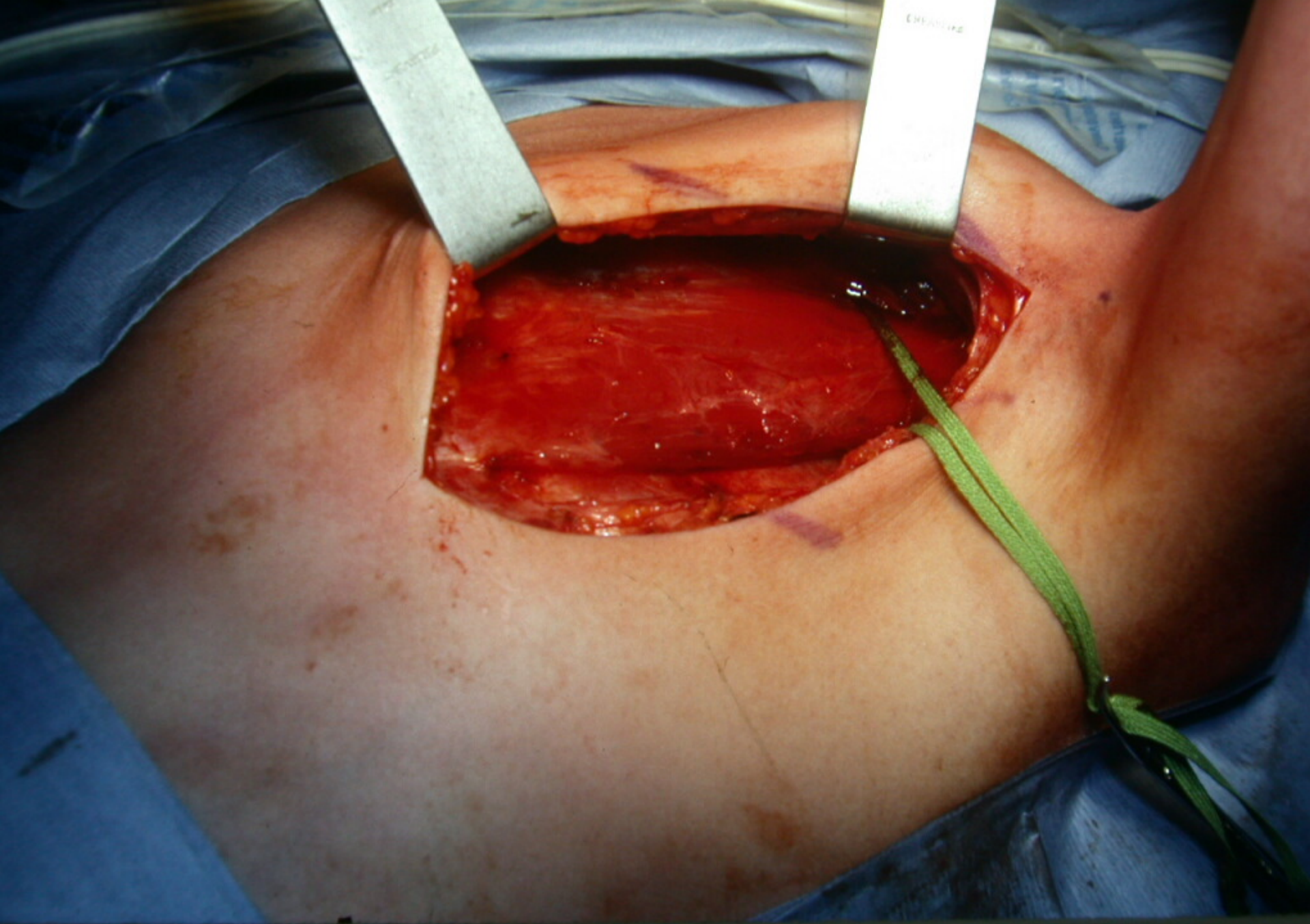


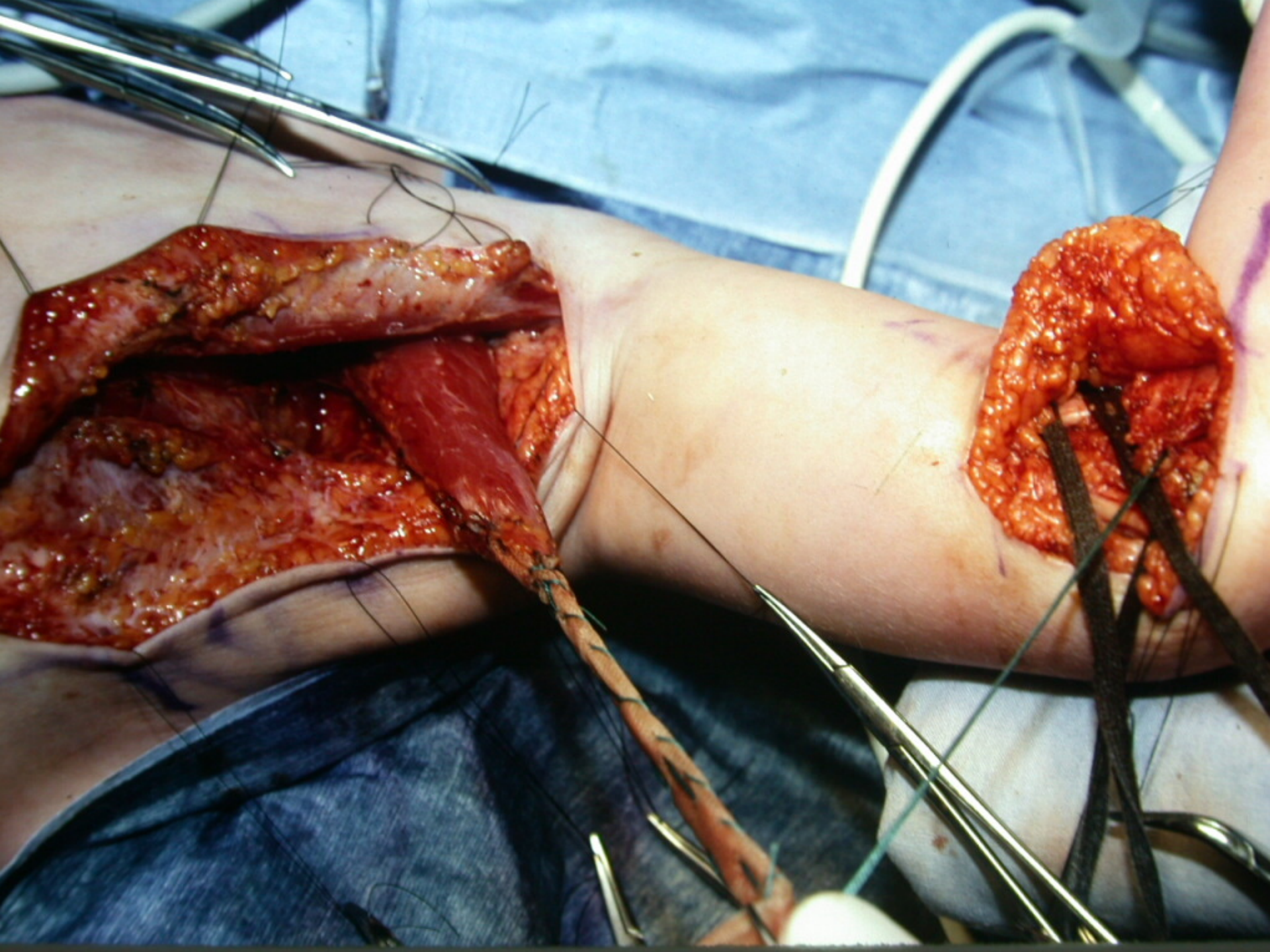


2. REANIMER FONCTION ABSENTE OU DEFFICITAIRE

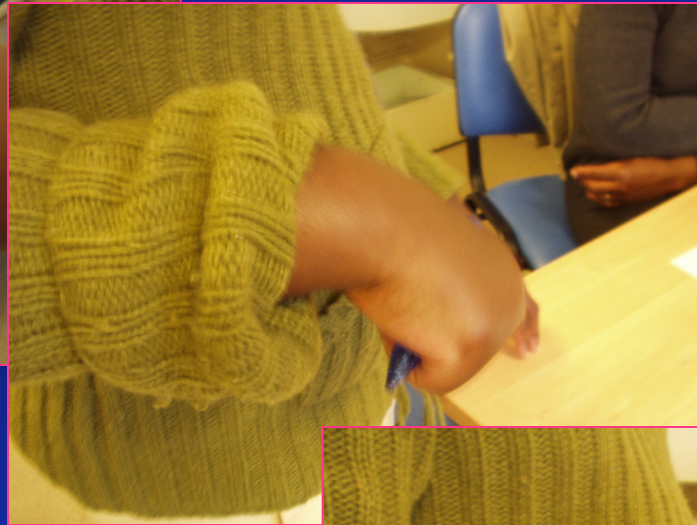
- MOBILITE PASSIVE COMPLETE**
- MUSCLE TRANSFERE A 3**





















CONCLUSION

- **PATHOLOGIE LOURDE**
- **COLABORATION DE TOUS LES ACTEURS:**
 - **OBSTETRICIENS +++**
 - **PEDIATRES**
 - **REEDUCATEURS**
 - **ERGOTHERAPEUTES**
 - **CHIRURGIENS**

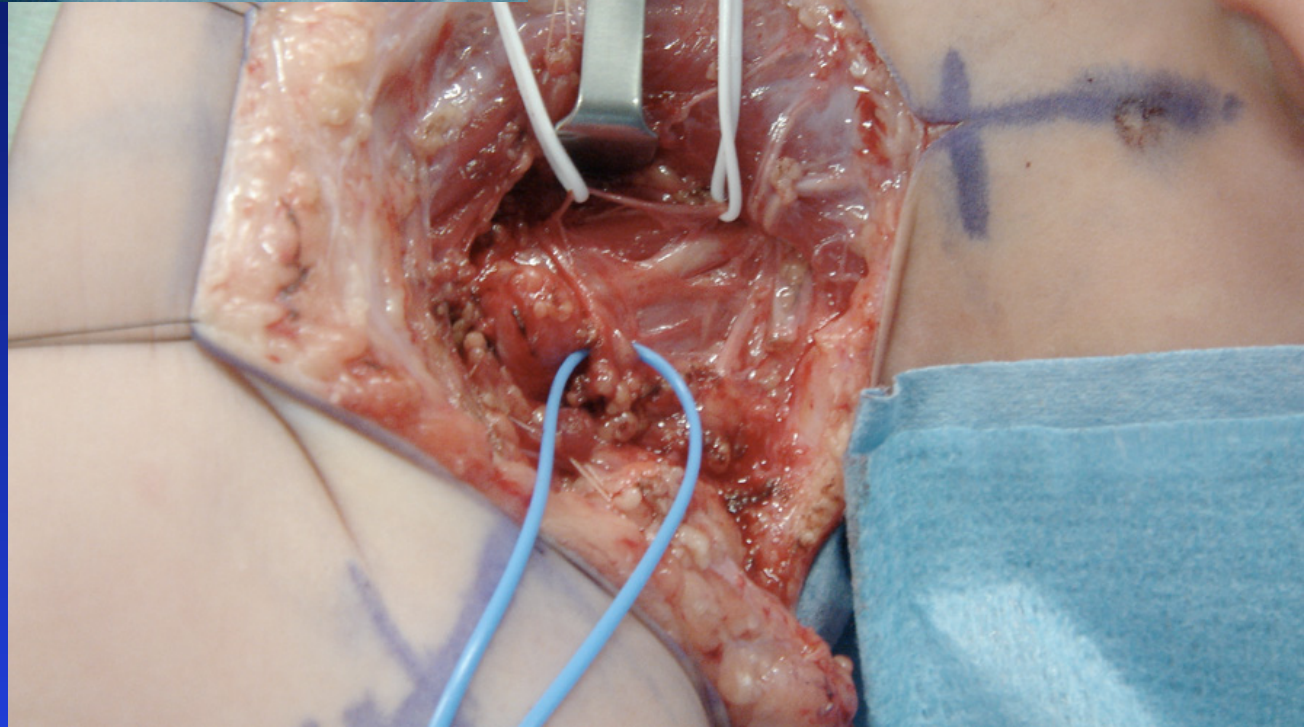
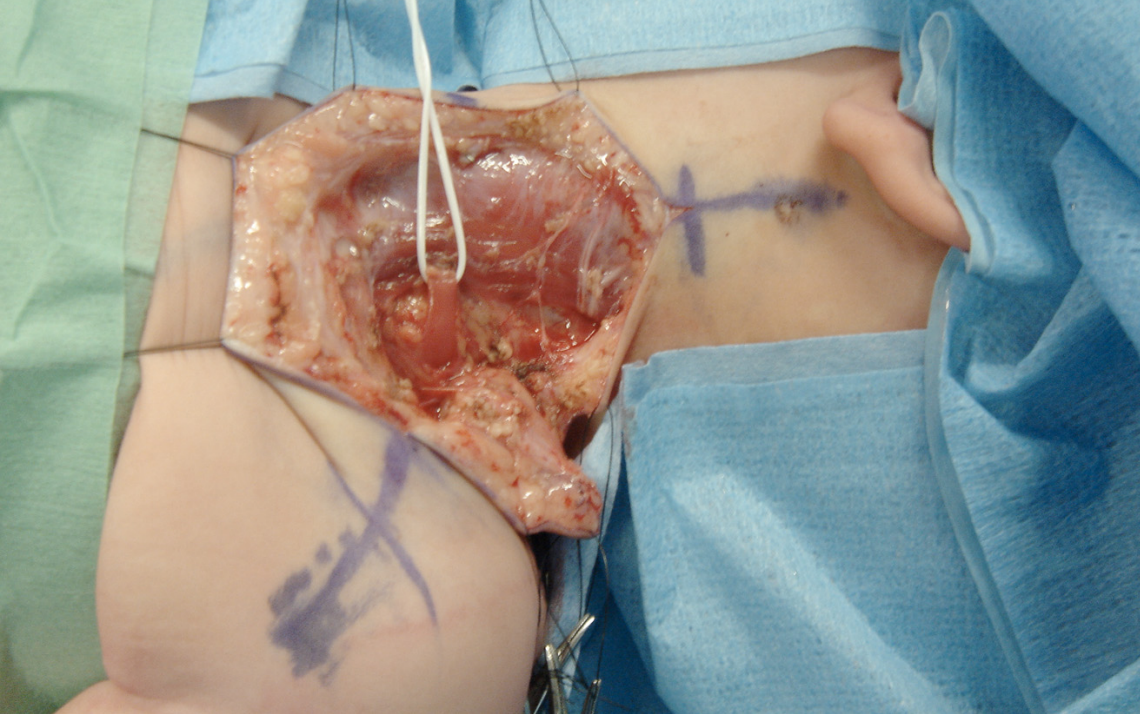


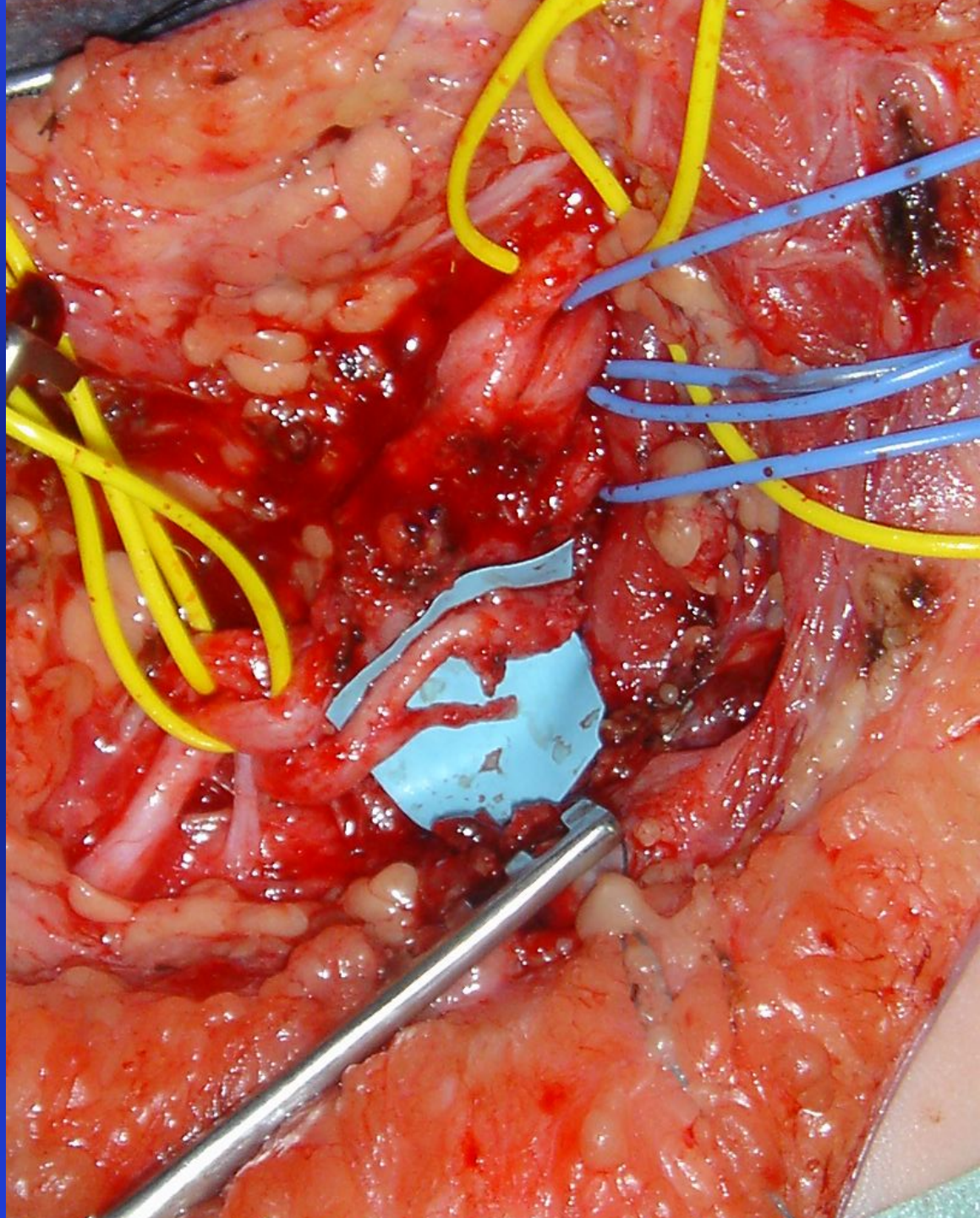
CONCLUSION

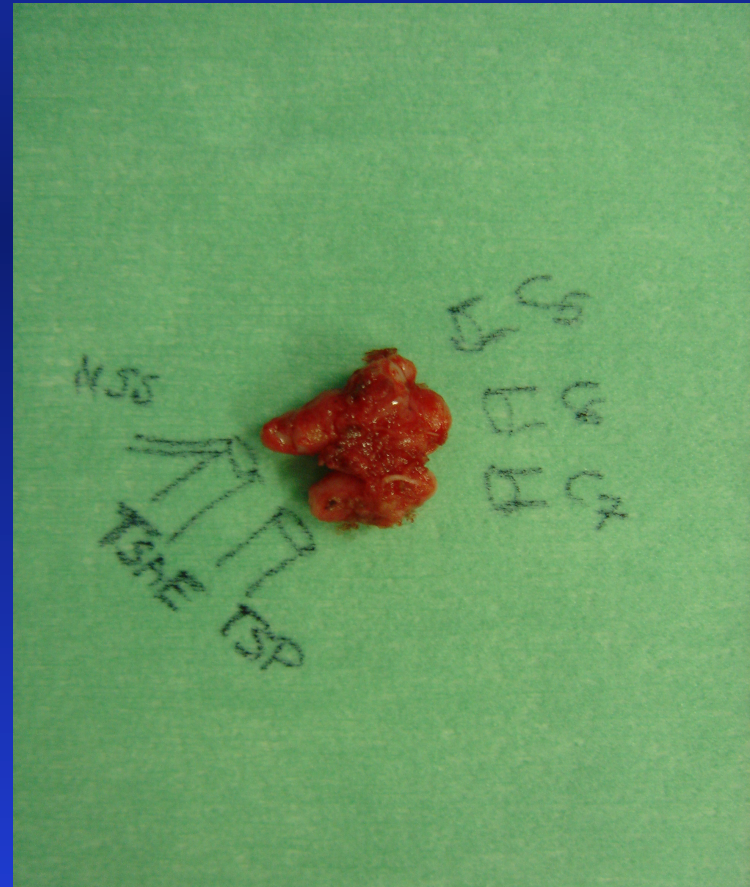
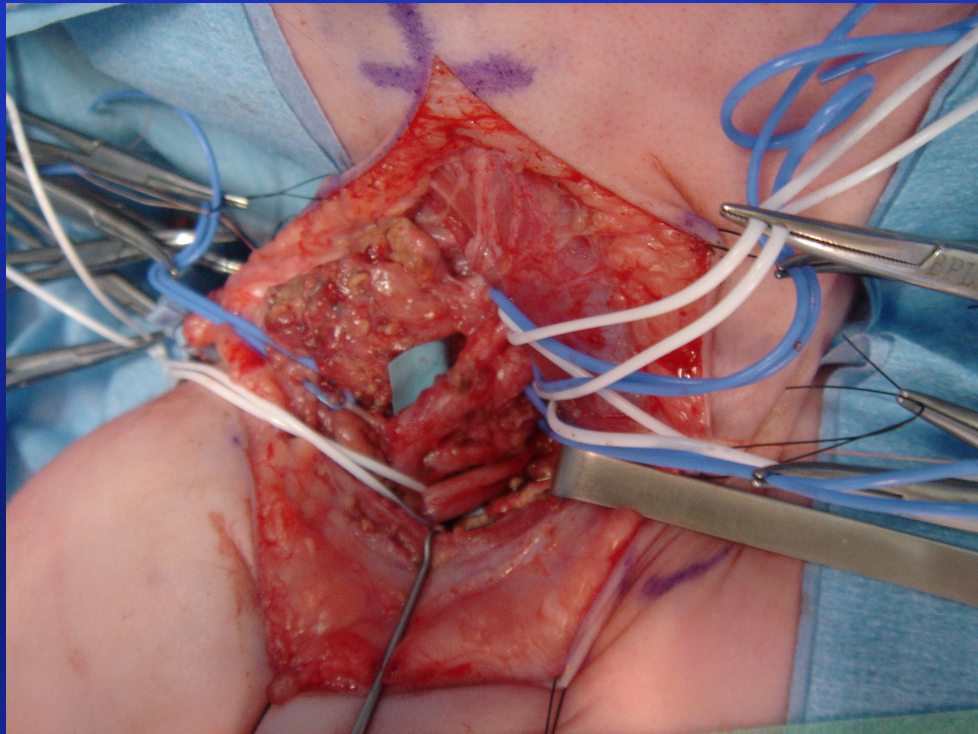
- **DIFFICULTES DANS
L' APPRENTISSAGE**
- **INTERET DE CENTRALISER LA
PATHOLOGIE ➡ EXPERIENCE**

CONCLUSION

- **PATHOLOGIE PEU FREQUENTE**
- **CENTRALISEE**
- **ASSOCIATION PARENTS**
INTERNET
- **RESPONSABILITE MEDICO-LEGALE**
OBSTETRICIEN
CHIRURGIEN
POUVOIRS PUBLICS



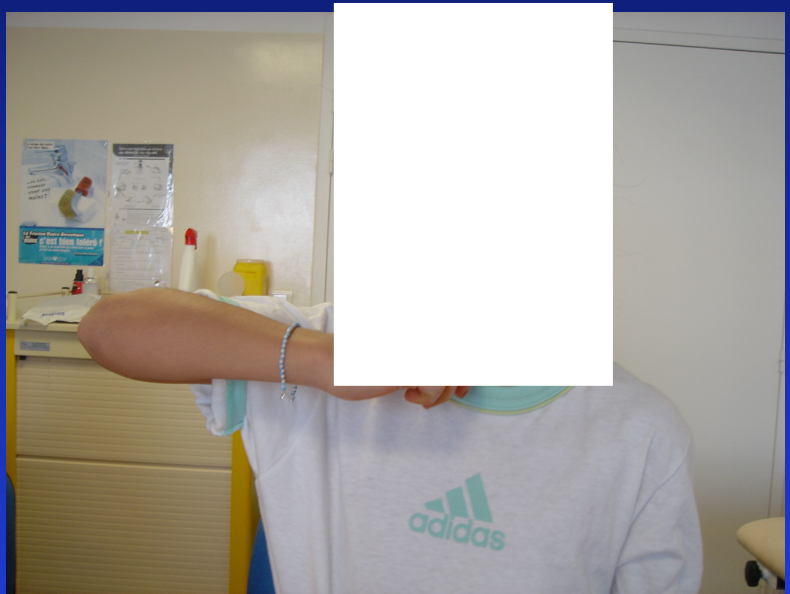




ROTATION EXTERNE D'ÉPAULE

DEUX COMPOSANTES :

- **R. E. SCAPULO-HUMERALE**
- **R. E. SCAPULO-THORACIQUE**



ELIMINER LA R.E. SCAPULO-THORACIQUE

