The effect of time internal between military or civilian vascular trauma and surgical repair

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In this series compose of 269 patient, 98 cases were military trauma and 271 cases non-military or civilian trauma. In the 50 percent of military cases the interval from trauma to surgical procedure were less than 8 hours. In this condition 3 cases because of surgical failure amputation were performed and in the remaining result of surgery were good. In 18 (22/8%) this interval were between 8-12 hours and in a case performed amputation and in the remaining by debtidment of muscle necrosis, he limb were salvaged. The result of surgical procedure inorder to limb salvage was satisfactory. About 25/15(43) Percent the interval to surgical procedure over 8 hours, in which 10 patients undergo amputation and the remaining by fasciectomy and debridment with some sensory and motor disturbance the limbs salvaged.

In summary, indications for late arterial repair after 8 hours from trauma are as censer of extensive skin necrosis, normal kidney functions, absence of fracture or muscle necrosis in site of arterial injury and present adequate soft tissue for coverage of arterial graft or repair, and absence of air in tissue or crepitating. In absence of this indication, limb salvage will be failure and amputation to be performed without delay.