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Pedicled Anterolateral Thigh Flap for Trunk Soft Tissue Defect Reconstruction

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Purpose:

Trunk and perineum soft tissue defect may result from trauma, tumor resection, or infection. Management of these defects poses a significant challenge. The pedicled anterolateral thigh(ALT) flap is more reliable compared to free ALT flap, has a good arc of rotation, and can be harvested as a fasciocutaneous flap with or without muscle depending on local anatomy and reconstructive needs. We present our experience of pedicled ALT flaps for reconstructive of soft tissue defect of trunk

Materials and Methods:

During December 2008 to August 2018, there were 11 patients (6 males and 5 females) who received pedicled anterolateral thigh(ALT) flaps as complex abdominal and pelvic reconstructions. The etiology of trunk and perineum soft tissue defect includes benign disease, local advanced cancer or metastatic cancer at trunk.

Results:

There are 8 patients (66.6%) received tumor excision with oncosurgical defect at trunk. The average size of pedicled ALT flap is 165.3cm2(Maximum: 480cm2). The most frequent reconstruction region is abdominal wall (7 patients, 64%). The longest length of pedicle is 25cm. There was no flap loss. Post-operative complication were noted in 2 cases(16%), including wound infection and wound poor healing.

Conclusion:

Pedicled ALT flap is a safe procedure with low complication rate for trunk soft tissue defect reconstruction

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