

S.A. Society for Surgery of the Hand

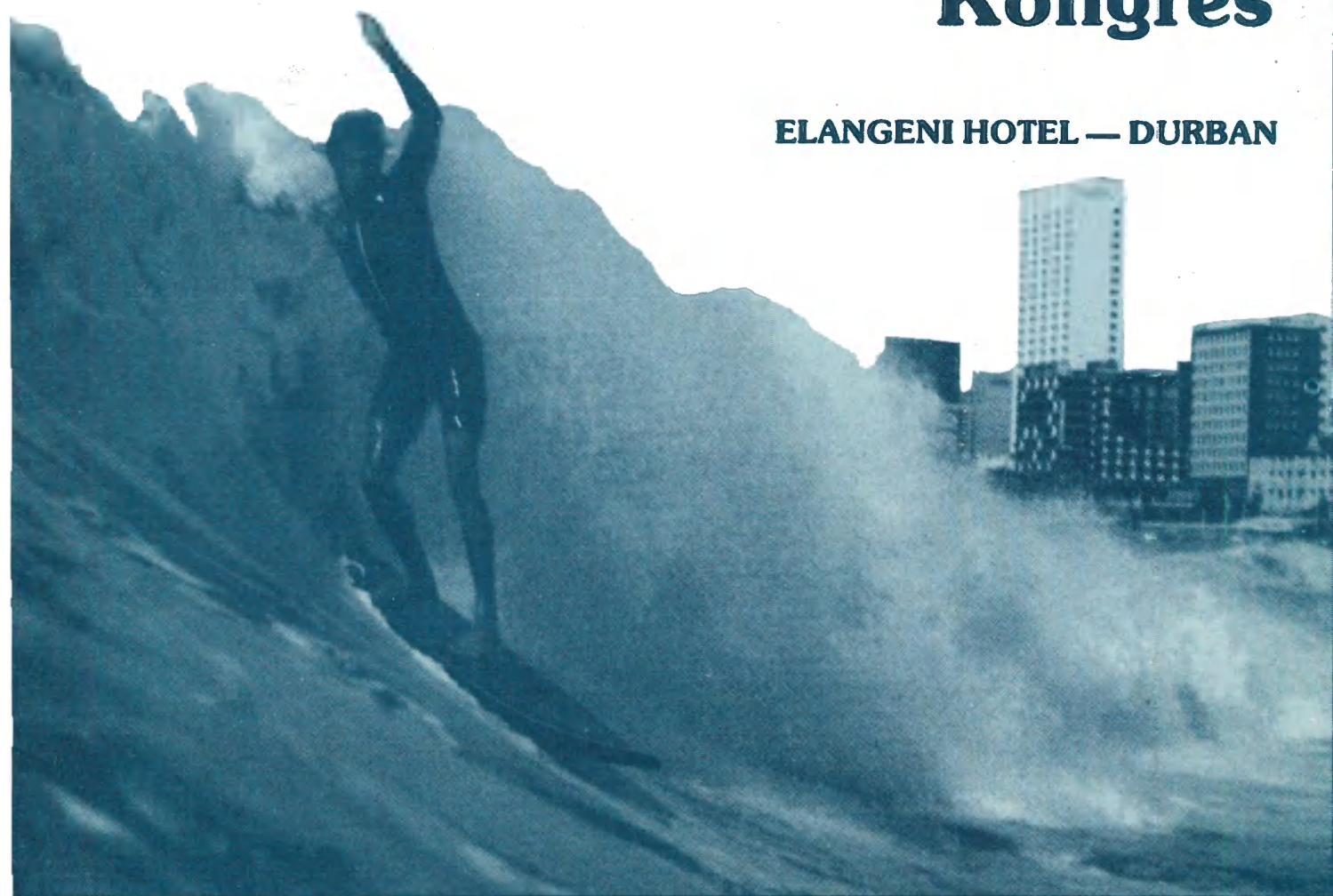
(Incorporated Association not for gain)

S.A. Vereniging vir Handchirurgie

(Ingelyfde Vereniging sonder winsbejag)

Congress 1981 Kongres

ELANGENI HOTEL — DURBAN



We wish you a successful Congress



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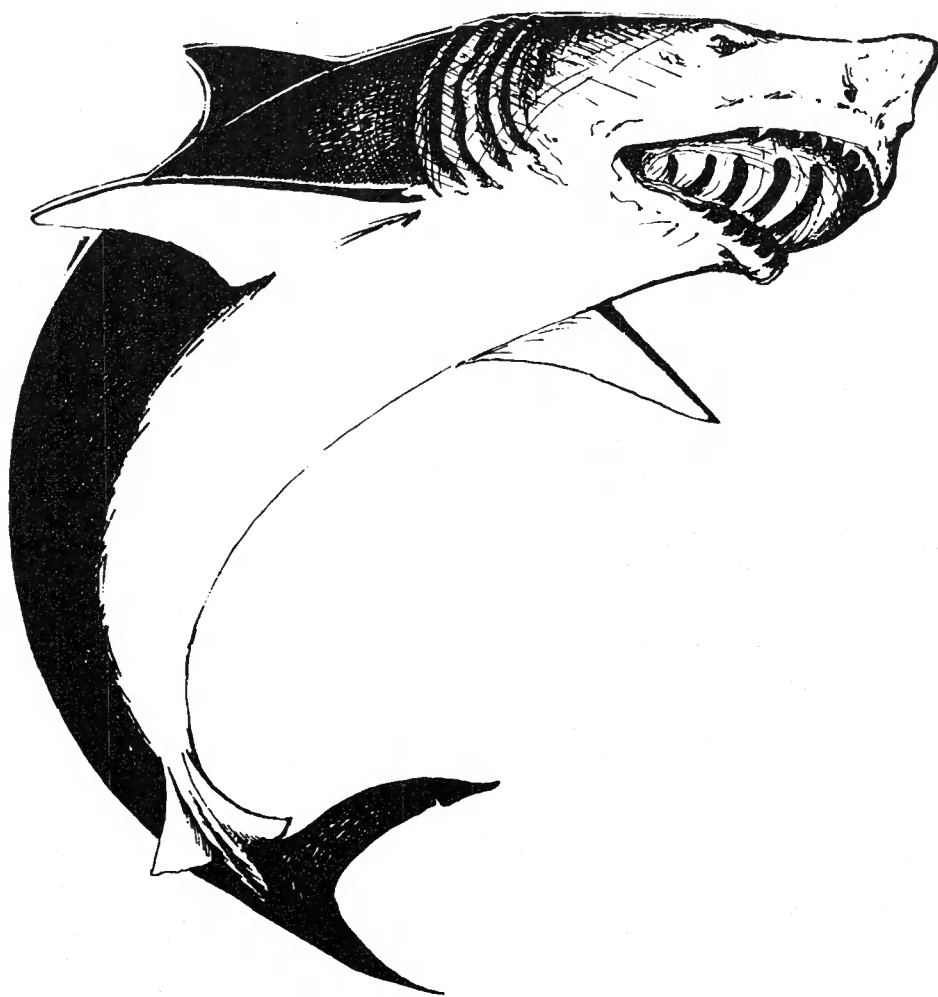
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MONDAY 25 MAY 1981

08h00 — 09h00 REGISTRATION

09h00 — 10h00 ANNUAL GENERAL MEETING (members only)

AGENDA

1. Welcome address by the President
2. Apologies
3. Proxies
4. Minutes of the previous Annual General Meeting
5. Matters arising from the minutes
6. President's report
7. Financial report
8. Proposal of new members
9. Election of new ExCo Members for the period 1981 - 1983
10. Next Annual General Meeting.
11. General



Monday/Maandag: 25 May/Mei 1981
Registration/Registrasie: 8h00 — 9h00

Annual General Meeting 9h00 — 10h00
(members only)

Jaarlikse Algemene Vergadering 9h00 — 10h00
(lede alleenlik)

PROGRAMME

PROGRAM

CHAIRMAN/VOORSITTER : MR/MNR S. BIDDULPH

- 10h00 — 10h15 The use of Intravenous Regional Anaesthesia for the Reduction of Forearm Fractures — DR V. NAIDU
Die gebruik van binnearse lokale verdowing vir die reduksie van voorarm frakture — DR V. NAIDU
- 10h15 — 10h20 DISCUSSION/BESPREKING
- 10h20 — 10h30 The Treatment of Isolated Fractures of the Distal Ulna — DR I.W.D. DYMOND
Die behandeling van geïsoleerde frakture van die distale ulna — DR I.W.D. DYMOND
- 10h30 — 10h35 DISCUSSION/BESPREKING
- 10h35 — 10h50 Bacteriology of Hand Infections at Baragwanath Hospital — DR D. BARNES
Bakteriologie van hand infeksies by Baragwanath Hospitaal — DR D. BARNES
- 10h50 — 11h00 DISCUSSION/BESPREKING
- 11h00 — 11h20 TEA/TEE

CHAIRMAN/VOORSITTER : PROF. T.K. SARKIN

- 11h20 — 11h40 Flexor Tendon Repair of the Hand — A New Technique using a Looped Suture — DR K. TSUGE
Flexor tendon hegting in die hand — die gebruik van 'n nuwe lussiessteek — DR K. TSUGE
- 11h40 — 11h50 DISCUSSION/BESPREKING
- 11h50 — 12h00 A Rare Tumor in an Unusual Location — Malignant Haemangio-endothelioma in a Phalanx — DR I.D. LEARMONTH
'n Seldsame gewas op 'n ongewone plek — kwaadaardige haemangio-endoteliaan van die falanks — DR I.D. LEARMONTH
- 12h00 — 12h05 DISCUSSION/BESPREKING
- 12h05 — 12h15 Ganglions of the Hand as seen at Natalspruit Hospital — DR D.R. VAN DER JAGT
Ganglions van die Hand soos gesien by Natalspruit Hospitaal — DR D.R. VAN DER JAGT
- 12h15 — 12h20 DISCUSSION/BESPREKING
- 12h20 — 12h30 The Conservative Management of the Rheumatoid Wrist — MR S.L. BIDDULPH
Die Konserwatiewe Behandeling van die Rheumatiese polsgewrig — MNR S. L. BIDDULPH
- 12h30 — 12h35 DISCUSSION/BESPREKING

* Wassel type 1 - VII polydactyly.
 What component of interest develop.
 Types: dist, prox phal, MC. type, Tri phal.

12h35 — 12h50 Swanson's Trapezium Replacement — Follow up for 50 cases — DR M. ITZHAKI
 Swanson se Trapezium Vervanging — Opvolg van 50 gevalle —
 DR M. ITZHAKI

12h50 — 12h55 DISCUSSION/BESPREKING

12h55 — 14h00 LUNCH/MIDDAGETE

CHAIRMAN/VOORSITTER: DR C. BLOCH

14h00 — 14h20 Polydactyly of the Thumb — DR K. TSUGE
 Polidaktelie van die duim — DR K. TSUGE

14h20 — 14h30 DISCUSSION/BESPREKING

14h30 — 14h40 Hand Infection — DR N.G.J. MARITZ
 Hand Infeksies — DR N.G.J. MARITZ

14h40 — 14h45 DISCUSSION/BESPREKING

14h45 — 15h00 The Mechanical Stability of Internal Fixation of Fractured Phalanges —
 DR IAN FYFE
 Die meganiese stabiliteit van interne fiksasie van falanks frakture —
 DR IAN FYFE

15h00 — 15h05 DISCUSSION/BESPREKING

15h05 — 15h15 Assessment of the Results of Tendon Transfers — MR K.S. NAIDOO
 Resultate van flexor tendon verplanting — MNR K.S. NAIDOO

15h15 — 15h20 DISCUSSION/BESPREKING

15h20 — 15h30 Regional Anaesthesia in Hand Injuries — MR J.H. FLEMING
 Lokale verdowing in handbeserings — MNR J.H. FLEMING

15h30 — 15h35 DISCUSSION/BESPREKING

15h35 — 16h00 TEA/TEE

CHAIRMAN/VOORSITTER: DR D. MARAIS

16h00 — 16h20 Acute Multiple Tissues Injury of the Hand — DR K. TSUGE
 Akute Trauma van die hand — DR K. TSUGE

16h20 — 16h30 DISCUSSION/BESPREKING

Hand infek
 50% staf
 40% staf.
 12% geen
 kweek.
 +20% (gum-)



The use of Intravenous Regional Anaesthesia for the Reduction of Forearm Fractures.

Dr V. Naidu

A study of 50 patients who had recent forearm fractures reduced using intravenous regional anaesthesia was carried out.

The anaesthesia was assessed in terms of :

Muscle Relaxation

Sensory Impairment

Subjective Experience of the Patients

Thirty four had excellent results, 7 good, 6 fair, 2 poor and one procedure was abandoned. Complications were remarkably few. One patient developed convulsions which was easily controlled by intravenous Diazepam. Two patients had a subjective feeling of ringing in the ear and hot flushes respectively on deflation of the tourniquet.



The treatment of Isolated Fractures of the Distal Ulna.

Dr I.W.D. Dymond

In isolated fractures of the distal ulna the integrity of the periosteum and interosseous membrane determine the stability of the fracture.

This is indicated by the initial displacement of the fracture.

A clinical trial based upon cadaver studies assessing the stability following osteotomy and following fracture of the distal ulna was performed.

Fractures displaced less than 50 per cent need below elbow immobilisation for protection and pain relief. Fractures displaced more than 50 per cent need above elbow immobilisation for stability. Most Fractures are less than 50 per cent displaced and unnecessary immobilisation increases morbidity significantly.

Bacteriology of Hand Infections at Baragwanath Hospital.

Dr D. Barnes

A review of seventy consecutive hand infections seen at Baragwanath Hospital is presented giving results of surgery and chemotherapy.

Flexor Tendon Repair of the Hand — a new Technique using a Loop Suture.

Dr K. Tsuge

A Rare Tumor in an Unusual Location. Malignant Haemangio-endothelioma in a Phalanx.

Dr I.D. Learmonth

This paper presents a rare case of malignant haemangio-endothelioma in a phalanx in a hand, with a brief review of the literature, and a consideration of the problem of management.

Ganglions of the Hand as seen at Natspruit Hospital.

Dr D.R. van der Jagt

A series of Ganglions at Natspruit Hospital is reported on. An analysis was made regarding distribution, sex, age and duration. Comparisons are drawn with other published series. Reasons for a specific pattern were sought.



The Conservative Management of the Rheumatoid Wrist.

Mr S.L. Biddulph

A stable painfree wrist joint is essential for the normal function of the hand. Deformaties and weakness at this level have far-reaching effects on the function of the rest of the hand.

The methods to control and minimise deformaties are discussed.

Swanson's Trapezium Replacement. Follow up of 50 cases.

Dr M. Itzhazi

41 Patients with 50 implants were followed up for up to eight years.

Indications for surgery, technique and results are discussed.

Hand Infection.

Dr N.G.J. Maritz

In a retrospective study at Pelonomi Hospital 125 cases of hand infection were analysed. Treatment and results are discussed. In 84% of cases the results were excellent. Human bites did badly.

The Mechanical Stability of Internal Fixation of Fractured Phalanges.

Dr I. Fyfe

This study compares the rigidity to bending of five techniques of internal fixation used to stabilise a standard osteotomy produced in forty-four human cadaveric phalanges. The experimental technique is described.



Assesment of the Results of Tendon Transfers.

Mr K.S. Naidoo

A group of patients who underwent tendon transfers for Radial Paralysis and Upper Trunk Brachial Plexus Paralysis will be presented to illustrate the various methods of assessing the results — emphasizing the need for functional rehabilitation.

Regional Anaesthesia in Hand Injuries.

Mr J.H. Fleming

A brief guideline to the various methods of regional and local anaesthesia in Hand Surgery. The pros and cons of each method will be discussed in full.

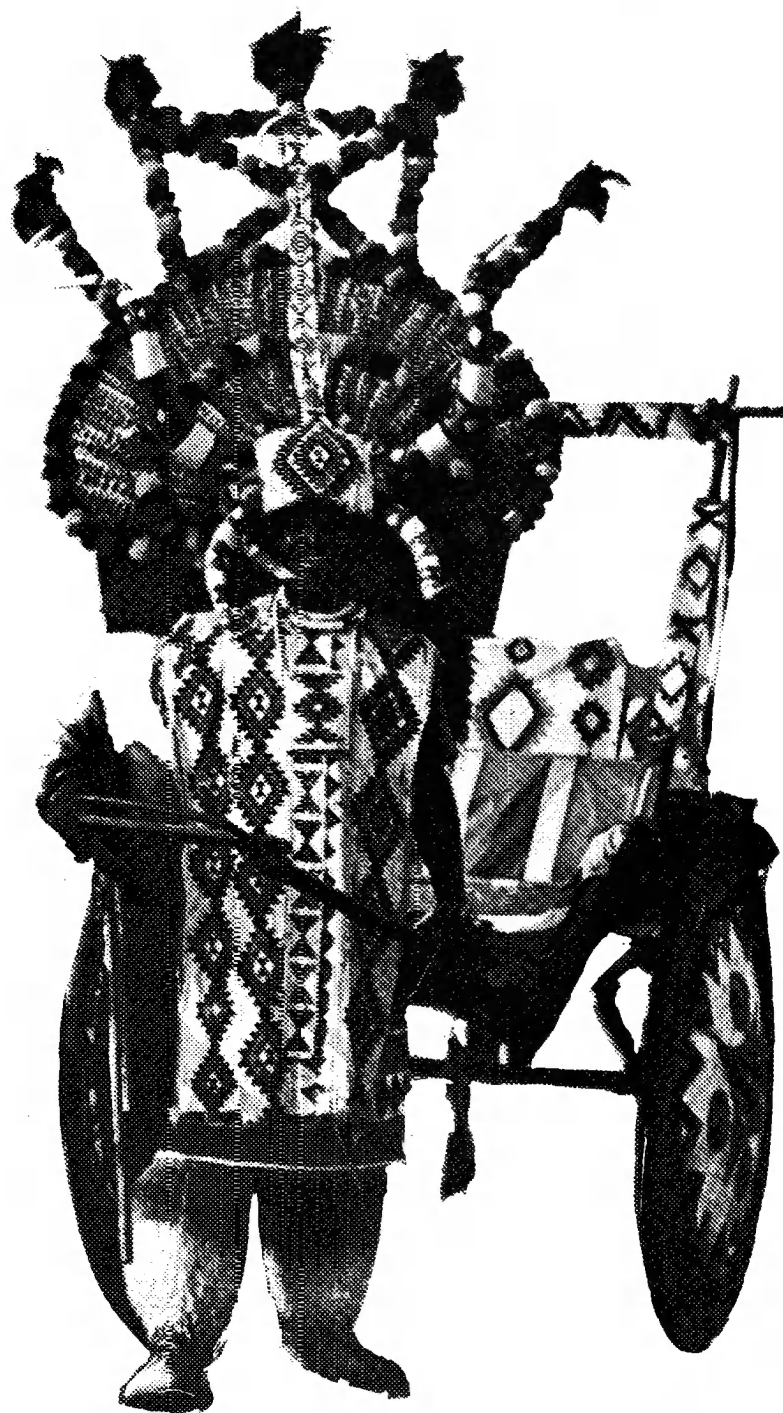


Acute Multiple Tissues Injury of the Hand.

Dr K. Tsuge



Ons wens julle 'n suksesvolle Kongres toe



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