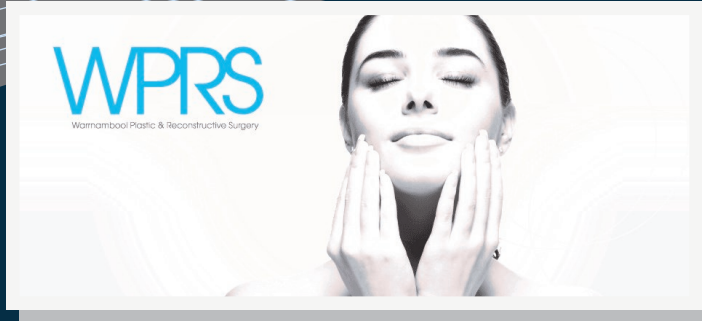


## this issue

- **Breast Reduction, does one size fit all?**
- **What is De Quervain's tenosynovitis and how is it managed?**



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### De Quervain's tenosynovitis: What is it and how is it managed?

De Quervain's (DQ) tenosynovitis is a condition that results in radial wrist pain and swelling and weakness with grasp. The condition affects women more commonly and is thought to be due to repetitive activities requiring grasping. A causal relationship to occupational activities has however not been identified.

DQ tenosynovitis involves thickening and inflammation of the synovial sheath of extensor pollicus brevis (EPB) and abductor pollicus longus (APL) i.e. the first dorsal compartment tendons.

Clinically they have pain on palpation over the 1<sup>st</sup> dorsal compartment often with swelling. Finklestein's test is positive however this may also be positive in other causes of radial wrist pain. The differential diagnosis includes:

1. Osteoarthritis of 1<sup>st</sup> CMCJ
2. Wartenberg's syndrome (Neuroma of the superficial radial nerve)
3. Intersection syndrome (pain at point where 1<sup>st</sup> and 2<sup>nd</sup> dorsal extensor compartment tendons cross over)

Diagnosis can often be confirmed with ultrasound

Management is often conservative with splinting and steroid injection. It is often very difficult to inject steroid into the 1<sup>st</sup> dorsal compartment as it is a tight compartment. As a result I have the injection performed under US guidance. A good fitting splint made by a hand therapist is very important post steroid injection as it allows the tendons to rest. If these conservative measures fail then surgical release is indicated. This is highly effective and recovery often takes 1 to 2 weeks.

### Breast reduction: Does one size and shape fit all?

There is no doubt that breast reduction surgery certainly helps many women with back pain, neck pain, shoulder grooving and discomfort with exercise. In addition it also helps improve their self-esteem as they are able to wear appropriate clothes for their shape.

Whilst symptomatic improvement is the most important gain from breast reduction, it is no less important to ensure that post reduction the shape and size of the breast is aesthetic to the women. In order to achieve the best aesthetic outcome from breast reduction surgery you need to be able to use a number of different techniques and adjust them according to the women's shape, size and reduction volume required. Just as one size and shape does not fit all, one operation does not fit all.

Considerations when deciding on breast reduction include:

1. Shape of the women: it is important to adjust technique according to the women's width and height.
2. Size of the reduction: different techniques for reduction of breast volume are used depending on the size of reduction required. Women tend to get fixated on cup size, however, I prefer to reduce breast volume to a level that provides an aesthetic shape whilst still providing symptomatic relief.
3. Skin pattern: whilst reduction of breast volume is the main aim in the procedure, how you manage the skin is equally important. There are 2 patterns of skin incisions, vertical pattern ("the lolly pop scar") and inverted T pattern ("the anchor scar"). The type of incision needs to be adjusted according to the women's size and shape.
4. Reduction of breast volume: there are a number of breast pedicles used in reduction (Inferior, central, supero-medial, superior). I commonly use the supero-medial pedicle as it produces the most natural breast appearance, however for very large reduction I will use the inferior pedicle.

It is important when women are considering a breast reduction that they are given all the options and have all the techniques available to them in order to achieve their best outcome.

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### HAND THERAPY



At WPRS, we have a qualified and experienced hand therapist working in our rooms 5 days per week. You can refer directly to hand therapy by faxing a referral through to us on 5562 5360.

#### Acute injuries and chronic conditions that can benefit from hand therapy include:

- Fractures, sprains, ligament injuries
- Cumulative trauma, carpal tunnel syndrome, tennis elbow, tendonitis and tenonosis
- Hand arthritis, trigger finger, rheumatoid arthritis, Dupuytren's contracture, effects of stroke and other neurological conditions.