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Reverse RAFF For Dorsal Hand Full Thickness Burn

Introduction
Management of full thickness burns can be difficult, especially in sensitive areas such as the hands. Reconstruction can often pose a challenge with basic principles being paramount and a focus on enhancing hand function essential. Following the reconstructive ladder can be beneficial and assists one to make a sensible choice.

Method
We highlight an interesting case of a 41-year-old right hand dominant labourer who had a full thickness burn with a thick escher to his dominant dorsal base of thumb. His injury was sustained by having his hand held over a candle flame for a sustained period of time. The burn was down to muscle with the first web space exposed and Extensor Pollicis Longus tendon on view and non viable.

Results
After several debridement's to remove necrotic tissue, tendon and muscle a reverse Radial Artery Forearm Flap was designed to reconstruct the defect. The flap contoured well to the defect, created minimal donor site morbidity and provided excellent hand function. The patient recovered well with appropriate hand therapy and is now back at work doing heavy labouring.

Conclusions
A reverse RAFF is an excellent local option to reconstruct full thickness burns on the dorsum aspect of the thumb where hand function is paramount. It is an appropriately thin flap, very reliable and contours to defects in this area well.

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