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Paraspinal Muscle Flaps Decrease Wound Healing Complications in Patients with Ehlers Danlos Syndrom

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Introduction: Patients with Arnold Chiari Malformation (CM) often suffer concurrently with Ehlers Danlos Syndror after various surgeries. These complications are highly evident in the setting of cervical and lumbar spinal fusion. of post-operative wound healing complications in this patient population. The use of myofascial flaps, a paraspina operative complications and improve morbidity in patients with CM and EDS. The authors reviewed all postoperat underwent bilateral paraspinal muscle flap reconstruction.

Methods: This study cohort consists of patients who underwent bilateral paraspinal muscle flap reconstruction af years of 2016-2024. Retrospective cohort study was performed of 556 patients and post-operative complications wound dehiscence, bone matrix infection, and return to operating room were analyzed. Patients who had prior su chronic pressure injuries after surgery were excluded from this study.

Results: The retrospective cohort study consisting of 556 patients and complication rates were compared to a lite postoperative complications. Retrospective cohort study vs literature review, respectively, shows rates of wound c vs 3.3%), seroma formation (2.5% vs 2.9%), surgical site infection (1.40% vs 4.5%), bone matrix infection/hardwa 4.25%). Notably, patients in our study who underwent bilateral paraspinal myofascial flaps had fewer wound comp the benefit of myofascial flaps in patients with connective tissue disorders.

Conclusion: Using a paraspinal muscle flap reconstruction for posterior spinal fusion cases in patients with conn number of post-operative complications. It is evident based on our study that postoperative complications are rec to literature review. It is also important to note there is limited literature on the topic of spinal reconstruction in pati complications are noted in orthopedic literature and there is a need for expansion of this research in the plastic su scale cohort study is able to demonstrate the benefit of paraspinal myofascial flaps in EDS when undergoing post