

1. Sternocleidomastoid pseudotumor of infancy: a report of thirteen cases.

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JBR-BTR. 2012 Jan-Feb;95(1):6-9.

Sternocleidomastoid tumor of infancy (SCMTI) is a rare cause of benign neck masses in neonates and infants. It has to be differentiated from other congenital space-occupying lesions in the cervical region.

PATIENTS AND METHODS

The files of 13 infants with a mean age of 6 weeks, presenting with a lateral neck mass at Sahloul University Hospital in Sousse (Tunisia) between 2007 and 2009 were retrospectively studied. All of them underwent physical and ultrasonographic examination. MRI was performed in only one case.

RESULTS

Ultrasonography (US) showed a soft tissue mass of sternocleidomastoid muscle (SCMM), or a homogeneously enlarged muscle without any focal mass. MRI revealed a fusiform enlarged muscle. Diagnosis of SCMTI was established in all cases. Conservative treatment was recommended in all cases with physiotherapy in 2 cases.

CONCLUSION

US is the best imaging modality for the diagnosis of SCMTI and the first one to be performed. Additional diagnostic imaging modalities are unnecessary in most of the cases.

2. Patients with complicated Pott's disease: Management in a rehabilitation department and functional prognosis.

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Ann Phys Rehabil Med. 2012 Apr;55(3):190-200.

OBJECTIVE

The objective is to study the rehabilitation management and to assess autonomy in daily life activities as well as walking recovery in patients with complicated Pott's disease.

PATIENTS AND METHODS

Retrospective study in nine patients over a period of 8 years extending from 2000 to 2008, collated in the Department of Physical Medicine and Functional Rehabilitation, CHU Sahloul, Sousse, Tunisia.

RESULTS

The mean age of our patients was 43.8 years; sex ratio was 5/4. The spine involvement of tuberculosis was dorsal in seven cases, dorso-lumbar in one patient, and multiple (cervical, dorsal and lumbar) in one case. All patients were paraplegic with a neurological involvement of the bladder. They had prior antituberculosis chemotherapy for at least 8 months. Decompression surgery was performed in six cases. Two female patients presented disorders of spinal posture

during treatment requiring surgical revision with osteosynthesis. All patients received additional rehabilitation care. Following a mean duration of hospitalisation in the Rehabilitation department of 47 days with twice-daily sessions of tailored physiotherapy, three patients remained in complete paraplegia, autonomous in wheel-chair and with vesical and sphincter incontinence. The measure of functional independence (MFI) was at admission/discharge 71/92.

CONCLUSION

Rehabilitation takes an important place in the medico-surgical management in Pott's disease, to limit or compensate the disabilities and handicap related to this pathology.

3. Ewing's sarcoma of the finger: report of two cases and literature review.

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Orthop Traumatol Surg Res. 2012 Apr;98(2):233-7.

Ewing's sarcoma of the finger is extremely rare. Pain and swelling of the affected finger are the most frequent presenting features. We report two cases of Ewing's sarcoma located at ring finger and the thumb in two children aged 14 and 10 years. The first patient died of generalised metastases despite surgery, chemotherapy and radiation therapy. The second had no localised recurrence or metastases after surgery and chemotherapy at last follow-up of 4.5 years after tumour resection. The tumour's surgical accessibility, chemotherapy, and radiation therapy improve the prognosis of this tumour.

4. Forearm hydatid cyst: an unusual presentation.

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East Mediterr Health J. 2011 Dec;17(12):994-5.

5. Images in clinical medicine. Pyogenic granuloma of the finger.

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N Engl J Med. 2012 Feb 9;366(6):e10.

6. Carpal tunnel syndrome. A Tunisian series.

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Tunis Med. 2012 Jan;90(1):62-5.

BACKGROUND

Carpal tunnel syndrome (CTS) is the most frequent ductal syndrome. Few epidemiological studies in Tunisia exist.

AIM

To describe clinical, biological and electromyographic data of Tunisian patients with CTS METHODS: A retrospective study including 80 patients with CTS, during the period going from 2009 to 2010.

RESULTS

A female predominance was observed with an average age of 52 years. Acroparesthesia was the main complaint, followed by night awakenings and muscular weakness. Physical examination showed a positive Tinel (91.2%) and Phalen (82.5%) tests, a decrease of tactile sensitivity (26.2%) and a thenar amyotrophy (10%). The Electromyography was abnormal in 85% cases. The most revealing lesions were demyelinating, sensitivo-motor predominance (66%) abnormalities. on Biology, hyperglycemia (12.5%), hyperuricemia (8.7%) and renal failure (7.5%) were the most observed. Medical treatment was drawn on analgesics and anti-inflammatory for 90% of our patients. Local steroid injections were indicated for 35% of patients, leading to a clinical improvement in 90% of cases. Surgery was made in only 13.8% patients.

CONCLUSION

Tunisian patients with CTS were female patients, housewives with obesity or overweight. No other differences were observed in comparison with the literature.

7. Metatarsal giant cell tumour in a 7-year-old child: a case report.

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Acta Orthop Belg. 2011 Dec;77(6):843-6.

Giant cell tumours are uncommon benign osseous neoplasias with an obscure origin. They mostly occur in the epiphyses of long bones after skeletal maturity. Occurrence in a metatarsal bone in a child less than 10 years old is quite exceptional. The authors report a case of a 7-year-old girl with an aggressive giant cell tumour of the first metatarsal bone of her right foot. Intralesional excision by curettage and grafting with morselised iliac cortical and cancellous bone was performed. The girl is now disease free since 7 years. Giant cell tumours in this location and age group are rare; they appear to represent a distinct, more aggressive form of tumour. They should be considered in the differential diagnosis of a destructive bony lesion in skeletally immature patients. Curettage and bone grafting with morselised iliac cortical and cancellous bone remains a treatment option, despite a high potential for recurrence.

8. Isolated greater tuberosity fracture: Short-term functional outcome following a specific rehabilitation program.

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Ann Phys Rehabil Med. 2012 Feb;55(1):16-24.

BACKGROUND

Evaluate the functional outcome of a specific program of rehabilitation during conservative treatment of fracture of the greater tuberosity.

METHODS

We retrospectively studied the records of 22 patients, with minimally displaced greater tuberosity fracture, according to inclusion criteria. All patients have received an early (one week after the injury) rehabilitation program based on physical analgesic therapy means, techniques for recovering range of motion, strengthening exercises, proprioceptive stabilization exercises and usability advices. The evaluation was done at baseline, one, two and three months of the end of physical treatment.

RESULTS

Pain, perceived disability and range of motion were improved significantly since the end of rehabilitation. The improvement of function (Constant score) was significant at different evaluation times. The functional result seems to be poor when patients are aged and pain is severe at baseline.

CONCLUSION

During conservative treatment of fracture of the greater tuberosity, earlier rehabilitation allows rapid range of motion and functional recovery limiting care duration. After fracture healing, the rehabilitation program becomes similar to that advocated in rotator cuff disease. Whatever the initial treatment choice, rehabilitation must be considered at the waning of the first week.

9. Lateral supramalleolar flap for coverage of ankle and foot defects in children.

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J Foot Ankle Surg. 2012 Jan-Feb;51(1):106-9.

The lower part of the leg, the ankle and the foot, is a difficult region to cover especially with exposure of bones or tendons. There are many options for covering soft tissue defect in these areas. The supramalleolar flap is an interesting procedure. The lateral supramalleolar flap was used in 8 cases for the reconstruction of skin defects of the ankle, heel, and foot that compromised the Achilles tendon and the osteoarticular system. Of the 8 patients, 5 were males and 3 were females, with an average age of 6.4 (range 2 to 10) years. The skin defect was secondary to trauma in all cases. The mean follow-up period was 31 (range 19 to 47) months; at the last follow-up visit, the region had been successfully covered in all cases. No necrosis of the flap was reported. The donor site morbidity was minimal. The lateral supramalleolar flap is an interesting surgical technique to salvage the lower extremity in children because this flap has a large skin paddle and a wide rotation arc and is based on a secondary vascular axis.

10. Unusual clinical presentation of a partial tibialis anterior rupture.

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Ann Phys Rehabil Med. 2012 Feb;55(1):38-43.

Subcutaneous rupture of the tibialis anterior tendon is rare. Diagnosis is usually clear. The essential clinical symptoms are progressively: footdrop gait, loss of ankle flexion strength, ankle foot pain and claw toes. But the occurrence of an asymptomatic time period between the injury and the onset of clinical signs can make the diagnosis more difficult. MRI is the gold standard examination for tendons injuries and associated bone and joints damages. Surgical exploration confirms MRI findings. It constitutes the treatment of choice for tibialis anterior tendon rupture. Surgical or functional techniques used have an impact on the design of the rehabilitation program, essential step in the care management of these injuries. It avoids postoperative tendon adhesions and their functional consequences. We report here a case of a man presenting with footdrop gait as the only clinical symptom.

11. Scapulohumeral hydatidosis: a new case in Tunisia.

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Bull Soc Pathol Exot. 2011 Dec;104(5):336-8.

Osseous hydatidosis is reported in only 0.5-2.5% of the cases. The scapulohumeral localization is extremely rare. A 39-year-old woman, born in a rural area of Tunisia, presented swelling and tenderness of the left shoulder with limited motion 7 days after a minor trauma. Plain radiographs, CT and MRI showed osteolytic scapulohumeral lesions, cortical rupture and multiple cysts in the muscles, which were suggestive of hydatidosis. Indirect haemagglutination test using hydatid antigen was positive (1/280). The patient refused radical surgery and underwent resection of axillary cysts. Albendazole was given in the recommended dose but was stopped immediately due to hepatic toxicity. Scapulohumeral hydatidosis is



extremely rare, often invasive and behaves like a locally malignant bone tumour. Its treatment is also difficult.

12. Effective dose for scoliosis patients undergoing full spine radiography.

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Radiat Prot Dosimetry. 2012 Apr;149(3):297-303.

Scoliotic patients underwent many radiological examinations during their control and treatment periods. Nowadays, few studies have calculated effective dose which is the primary indicator of radiation risk. In this study, the PCXMC program is used to calculate the effective doses associated with scoliosis radiography. Five age groups of patients, proposed by the National Radiological Protection Board, have been chosen: <1, 1-4, 5-9, 10-15 and ≥16 y (adult patients). Patient and radiographic data were collected from 99 patient examinations for both anteroposterior and lateral full spine X-ray projections. Results showed the effective dose ranged from 118 to 1596 μSv for the frontal projection and from 97 to 1370 μSv for the lateral projection, with patient age varying from 3 months to 22 y. This study presents the effective dose against patient age and demonstrates the necessity to optimise patient protection for this type of examination.

13. Glomus tumour of fingertip: report of eight cases and literature review.

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Musculoskelet Surg. 2011 Dec;95(3):237-40.

Glomus tumour is a rare, benign, soft-tissue tumour. Eight patients with eight histologically confirmed glomus tumours have been operated within the past 10 years. The median age at the time of diagnosis was 40 years. The tumour was located in the fingertip in all cases. The evolution ranged from 1 to 7 years. Clinically, the paroxysmal pain was usually characterised. Imaging findings were helpful in diagnosis. In post-operative, there was an immediate pain relief. No recurrence was observed during the last follow-up period of 4 years and 10 months.

14. Occupational low back trauma in Tunisia.

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Tunis Med. 2012 Apr;90(4):328-32.

BACKGROUND

In Tunisia, eight researches works, dealing with low back trauma (LBT), have been achieved in some occupational sector activities and only 2 of them have been published. Aim: To synthesize data provided by these 8 works realized between 1998 and 2007, in order to estimate the disorder magnitude and to describe LBT victims profile in Tunisia.

METHODS

The global population of study is made of 1357 LBT victims (977 belonging to the private sector and 380 to the public sector). The data collection was carried out according to an uniformed model for the 8 studies.

RESULTS

In the public sector, Commission Médicale Centrale data show that LBT account for 4 to 5% of occupational accidents (OA) and that their annual incidence is from 32 to 36/100000. In the private sector, Caisse Nationale d'Assurance Maladie data reveal that LBT account for 7.7% to 9.5% of OA. LBT victim is a male (83%), with an age ranging between 36 and 43.5 years, married (84%), educated up to the secondary educational (91%) with a vertebral disorders history (34%). He belongs to the general-purpose workmen category in 1/2

of cases with an average seniority ranging between 7.8 and 16.2 years. LBT almost subjects, get at least of a sick leave. Work days lost is around 210 days for the private sector and 18 days for the public. The per annum amount versed for each LBT case, within the framework of the Total Temporary incapacity, is of 1449.319 DT and 45% of the subjects profit from a professional reclassification.

CONCLUSION

Our results join those of international studies having dealt with LBD in professional environment. In spite of some limiting methodological issues, they allowed us to provide to professionals in occupational health useful data for this occupational risk management.