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Research Article

## THERAPEUTIC AND INCIDENCE OF POPLITEAL MOANS IN DETERIORATING VERTEBRAL SURGICAL PROCESS

<sup>1</sup>Dr. Muiz Ilahi, <sup>2</sup>Dr. MahRukh Khawar, <sup>3</sup>Dr. Muhammad Imran<sup>1</sup>DHQ Teaching Hospital Gujranwala

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**Abstract:**

**Aim:** The aim of this assessment and evaluation and investigation was to investigate the incidence, consequences and therapeutic of continual popliteal moans during lumbar vertebrae surgical process in vertebral deteriorating syndromes.

**Assessment and evaluation and investigation design:** It's an experiential expressive assessment and evaluation.

**Material and method:** During this period, a total of 305 operated victims were included in the assessment and evaluation and investigation. These victims underwent imaging and preoperative preparation. The assessment and evaluation and investigation was conducted in the Neurosurgical process Unit II of Sir Ganga Ram Hospital Lahore for one-year duration from December 2018 to November 2019.

**Results:** Popliteal moans were present in 29 sufferer, popliteal moans were identified preoperatively in 27 victims, 21 were repaired and 6 victims were treated conventionally. A total of 305 victims were included in the assessment and evaluation and investigation. Conformist therapeutic was unsuccessful in these 6 victims and re-exploration and repair was performed, 2 sufferer after Popliteal moans were identified due to cerebro-vertebral fluid leakage in 1 case, and the second case in the assessment and evaluation and investigation was pseudo menin-gocoele. The male female ratio was 1:1.68% out of 305 victims' primary surgical process was performed in 238 victims while revisional surgical process was perform in 67 sufferer.

**Conclusion:** Dura moans are more common in revision surgical process and all dura moans must be repaired.

**Key words:** Popliteal tear repair, Popliteal tear, Deteriorating vertebral surgical process.

**Corresponding author:****Dr. Muiz Ilahi,**

DHQ Teaching Hospital Gujranwala.

QR code



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**INTRODUCTION:**

As reported in a European assessment and evaluation and investigation, the incidence of popliteal tear in vertebral stenosis surgical process is 8.5%, while in revision surgical process 13.2%. Popliteal moans are one of the most common impediments of deteriorating vertebrae surgical process: its incidence ranges from 1.08% to 17.7% depending on the features of the victim and surgical process.. It has been reported that victims with dura mater rupture have back pain and headache more often. An unrecognized or irreversible rupture of the meninges can cause leaking fluid in the postoperative period, leading to pseudo-meningo-coele and CSF fistula and even meningitis.

The aim of the assessment, evaluation and investigation was to assess the incidence, therapeutic and outcomes of dura mater fractures in the lumbar vertebrae at the Peripheral Training Hospital during surgical process. Popliteal rupture has been treated differently at different sites with varying results, and there is no effective and clinically used administration algorithm for treating popliteal rupture (DT).

**MATERIAL AND METHODS:**

Emergency decompression surgical process, cervical vertebrae surgical process and traumatic vertebrae surgical process were excluded. This descriptive assessment and evaluation and investigation was held in 305 victims who underwent vertebral surgical process for deteriorating syndromes in the neurosurgical process Unit II of Sir Ganga Ram Hospital Lahore for one-year duration from December 2018 to November 2019. Preoperative vertebrae imaging was performed using computed tomography (CT) and magnetic resonance imaging (MRI). All victims included in this assessment and evaluation and investigation were examined by a Neurosurgical process consultant and a physician's assistant. The type of surgical process was registered and all victims were followed at the neurosurgical process clinic for 12 months. Elderly neurosurgeons operated on these victims.

**RESULTS:**

Man: The woman was 114: 191 (1: 1.6). A whole of 305 victims procured share in the assessment and evaluation and investigation.

**Table 1: Sex Incidence.**

Sex	No.	%
Female	191	67%
Male	114	37%
Total	305	100%

**Age Incidence**

With average of 39 years, the age ranges from 22 – 70.

**Table 2: Type of Surgical process and popliteal moans.**

	Sufferer	Popliteal moans	
		No.	%
Revisional Surgical process	67	13	19.6%
Primary Surgical process	238	16	6.6%
Total	305	29	100.0%

**Type of surgical process and popliteal moans:**

The ratio of men to women among 238 victims undergoing primary surgical process was 84: 154, and the ratio of men to women in revision surgical process

was 30:37. In 27 victims, popliteal rupture (DT) was surgically identified in a ratio of 13:14 M: F. While 238 out of 305 victims had lumbar disc prolapse,

vertebral stenosis and vertebral surgical process, 67 victims underwent revision surgical process.

#### Popliteal repair:

Sewing was difficult in 6 victims and treated with spongy subcutaneous drainage. The popliteal moans (DT) of these 27 victims were repaired mainly with 4/0 silk (non-absorbable threads in 21 victims).

**Table 3: Popliteal Repair.**

Repair	No.	%
Primary Surgical process for Repair	21	77.0%
Conservative trial and Surgical process	8	23.0%
Total	29	100.0%

These victims were treated conservatively for 10 days, but they did not respond satisfactorily, so both reopened and popliteal moans (DT) were repaired with 4/0 silk. During the operation, no popliteal rupture (DT) was identified, one of them was presented with CSF leakage, and the other with Pseudomeningocele.

#### DISCUSSION:

Therapeutic of the described potentially complex problem is described in the prose. Popliteal tear (DT) is one of the common iatrogenic impediments of vertebrae surgical process. However, in the prose, iatrogenic DT during vertebral surgical process is surprisingly rare. Male: female 114: 191. However, the explanations were based on a small number of studies involving relatively few victims. A total of 305 victims were included in our assessment and evaluation and investigation. The overall incidence of DT was 9.54%. Out of 305 victims, 238 underwent primary surgical process for vertebral deteriorating syndromes and 67 victims underwent revision surgical process.

Our results showed that the incidence of popliteal (DT) was 8.5% in victims operated on for vertebral stenosis and 13.2 during revision surgical process. A deep tear (DT) was observed in 16/29 with 6.73% in primary surgical process. It was reported that the rate of primary process and revision surgical process was 1.80% in the 1.8% series, the popliteal tear (DT) was 3.1%, and the signs and symptoms of popliteal tear (DT) caused permanent cerebro-vertebral fluid leakage. The incidence of DT in revision surgical process was 13/24% 19.42%. Tafazal et al. Wang et al. It has been reported that the incidence of popliteal moans (DT) was 14%. Camissa et al. Collapse of the bulging vertebral cord contour or postoperative headache, pronounced cerebro-vertebral fluid secretion, Pseudo-meningocele, cerebro-vertebral fluid fistula and meningitis and these moans are

generally a pronounced cerebro-vertebral fluid leakage.

Inoperable DT therapeutic fails. Various methods of surgical repair of dura mater moans have been described in the prose. In our assessment and evaluation and investigation, we detected 27 (93.1%) DTs for surgical process, and 2 victims had meningitis developing postoperative cerebro-vertebral fluid leakage in one case and pseudo-meningocele in the second case. In our assessment and evaluation and investigation, all DTs identified during surgical process were repaired with a 4/0 suture that could not be absorbed, and the wound was closed with layers containing victory and prolene. These include primary repair, tissue sealants or blood patches, tissue transplantation. They reported similar results in repairing dura mater moans (DT). In 23 of 27 victims, the initial repair of 23/27 (85.8%) was successful. Jeffery et al. In addition to 4 victims, all 2 of these victims experienced impediments due to unrecognized DT, initially treated with bed rest, foot lift and prophylactic antibiotics, none of these victims responded satisfactorily to conservative therapeutic and underwent new therapeutic. Examination and repair of DT by means of seam, spongy and vacuum drainage. Primary popliteal tear repair (DT) in four victims was unsuccessful and they had persistent headache, photophobia, and vomiting with a change in posture.

#### CONCLUSION:

Conservative therapeutic may not always provide the desired response. Popliteal Tear (DT) is more common in revision surgical process than in primary surgical process.

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