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International Congress on $\mathsf{PEDIATRICS}$

February 08-09, 2023 | Webinar

Quantification of procedure time and infant distress produced when percutaneous Achilles tenotomy is performed under topical local anaesthesia: a preliminary study

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Clubfoot is a new born congenital deformity. Nowadays, the "gold-standard" treatment is Ponseti Method. Achilles tenotomy (AT) is necessary procedure in more than 90% cases and it can be performed with local anaesthesia (LA). The AT with LA has been rejected in some Hospitals because of the potential "agressivity", but recent papers reported possible future neurological damages in babies due to early general anaesthesia or sedation. The real significance in terms of suffering, time and family affectation of AT with LA has never been reported. This study was designed to analyse significant parameters to measure the cry as a measurement of percutaneous AT with LA in infants with congenital clubfeet.

Material and methods: A total of 30 patients (43 feet) have been enrolled. Audio during AT is recorded with App iPhone 6 placed at 1meter distance. Time of procedure, duration and intensity of crying during AT (App deciBel10) were analysed. Family's involvement was evaluated through a satisfaction questionnaire. Neurological cases were excluded. Statistical study performed by Statcrunch (v2012-2016) Confidence Interval 95% (p<0.05).

Biography

Ana Maria Ey Batlle is a Equipo Ponseti Dra. Anna Ey, Clínica Diagonal, 08950 Barcelona, Spain and have experience in Pediatric Trauma and A also had a clinic for persons with DS is conducted by her since 2000. She formed a Support group that meets regularly every month, for parents and caretakers of persons with DS. She is also the patron of Spain Syndrome Federation and has chaired the Asia Pacific Down Syndrome Federation Meet at Singapore in 2016.from past many years and have treated many patients and achieved success on infant distress treatment.