SYNDACTYLY



Syndactyly: Syn = together in Greek

Epidemiology

More prevalent in males 50% are bilateral Autosomal dominant trait with variable penetrance Mnemonic 5, 15, 50, 30: i.e., thumb and

index 5%; ring and little: 30%

Types

I. Isolated Complete

Incomplete

II Complex Trisomy 13, 14, 21

Apert syndrome [Hypertelorism, clinodactyly, facies]

Ellis-van Creveld syndrome

Holt-Oram Syndrome [ASD, Radial club hand]

Poland's [Absence of Sternocostal head of pectoralis major]

Clinical

Common site: middle-ring

Presence of synonychia indicates complex Syndactyly]

Look for associated findings: heart, chest, mental retardation Look for the movements in the finger joints [symphalangism]

Look for polydactyly

Mental retardation

X RAY

Distal tip of the phalanx is joined in case of complex syndactyly Look for symphalangism, brachydactyly, and delta phalanx

SURGERY

Timing Simple type at 2 years of age

Complex type at 1 year

Technique

- 1. With multiple syndactyly, attend first to border digits
- 2. Never release both sides of the same digit
- **3.** Skin Shortage: combined circumference of two digits is 1.4 times the circumference of two digits held side to side.
- 4. Surgery: Z plasty and dorsal butterfly flap



Apert Syndrome

Syndactyly

Clinodactyly

Facies

Hypertelerism

Poland's syndrome

Pectoralis major is absent

Symbrachydactyly



