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MODERN TECHNOLOGY OF TREATMENT OF PATIENTS WITH CICATRICAL DEFORMITIES OF THE FOOT AND ANKLE JOINT

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Abstract
This article gives detailed information on how deformities of the foot and ankle joint are treated nowadays. In this article analysis on the factors rendering this case common are mentioned and pertinent solutions to avoid it have been provided.

Keywords: medicine, deformity, device, injection, patient, scar, rehabilitation, vitamin, tissue, blood, surgery.

Introduction

The steadily developing pace of modern medicine places increased demands on therapeutic approaches, in particular the reconstruction of damaged anatomical structures that provide subtle kinematic reactions, which are necessary tools for early household, social and professional reintegration of patients. The plastic properties of the selected graft during the reconstruction of the soft tissues of the foot, as an organ of movement bearing the load of the body, must also meet the increased requirements. In this regard, traditional methods and methods of reconstructive plastic surgery have somewhat lost their positions over modern methods and methods of soft tissue reconstruction. When choosing a plastic material to close extensive soft tissue defects in recent years, many authors prefer blood-supplied flaps with an axial type of blood supply, in describing which we use the term "functional flaps". Currently, the choice of tactics in the surgical treatment of patients with extensive defects and scar deformities of the posterior part of the foot is made taking into account the available arsenal of surgical methods and methods of a particular surgeon. At the same time, the nature and extent of the damage, the limitation period of the injury, the degree of possible violations of the sliding structures of the foot and the biomechanical properties of the selected graft are rarely taken into account.

The problem of closing extensive soft tissue defects of the lower extremities, especially the proximal parts of the foot, remains relevant at the present time. The problem is caused by the frequency of injuries, the relative deficiency and specificity of soft tissue architectonics, the accumulation of many anatomical structures in a small space, and the specific features of regional blood circulation of this segment of the lower limb. The problem is also aggravated by the increased requirements for the plastic properties of the selected plastic material, limiting the possibilities of traditional reconstructive operations. The method of choice in solving this problem is the use of blood-supplied composite flaps with an axial type of blood supply, in describing which we use the expression "modern technologies.

In assessing the long-term results of surgical treatment of patients with extensive soft tissue defects of the proximal parts of the foot and foot, clinical methods and modern diagnostic and instrumental methods were used to obtain objective data on the degree of restoration of limb function. The main

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reliable methods for assessing the effectiveness of reconstruction of soft tissues of the injured limb segment, in particular the proximal parts of the foot, we consider those results of surgical interventions based on the use of methods and methods of reconstructive plastic technologies, in which the restoration of full-fledged skin is achieved, contractures of adjacent segment joints and trophic disorders are eliminated and the restoration of the stereotype of kinematic movements in the shortest possible time. When choosing the tactics of surgical treatment of patients with extensive soft tissue defects of the proximal parts of the foot, especially in areas subject to constant stress, the plastic and functional properties of the tissue used are of paramount importance for restoring the full appearance and function of the foot.

2. The optimal methods of reconstruction of the soft tissues of the foot with extensive defects of the soft tissues of the proximal sections should be considered the use of skin-fascial or skin-muscle composite flaps with axial type of blood supply both in free and non-free form, which can significantly reduce the duration of treatment of patients.

To close wounds in the body, surgical intervention is usually required — stitching of tissues during the operation, but in some places it is extremely difficult to suture. Researchers from Harvard University, led by Ellen T. Roche, have come up with a new technique that can replace traditional stitches and is suitable even for hard-to-reach body parts. This approach, according to the developers, is much less invasive, traumatic and easier to apply than suturing. The method uses a catheter, two balloons and a biodegradable polymer patch. Balloons delivered to the right place from both sides are inflated, and they, expanding, press the patch to the fabric.

Subsequent exposure to ultraviolet light "glues" the patch to the site of damage. Then the researchers blow off the balloon and remove them from the body, leaving a patch instead of a seam. Scientists were able to test the new technique on live rats: the result was minimal inflammation and survival of all animals. A complex defect of the septum in the beating hearts of pigs was also corrected. Finally, the development was also used to seal stomach ulcers and abdominal hernias in pigs ex vivo. Apparently, the new strategy can be considered universal for getting rid of such damage.

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