French Trends in Carpal Tunnel Surgery:
An Online Survey of Members of the French Society for Surgery of the Hand (FSSH - SFCM - GEM)

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Jean-Edern OLLIVIER M.D.
Jérôme GARRET M.D.
No conflict of interest
Why this survey?

• Daily hand surgeon activity
• Several operating techniques
• Several anesthetic techniques
• Trend? Commercial?
Population

• Anonymous survey sent to 685 members:

• 129 answers = 19 %

• 41 % : exclusive hand surgery

• 53 % liberal, 28 % public, 19 % mixed
Surgical and anesthetic techniques

- Open or Mini-open: 55%
- Endoscopic: 41.1%
- Sonography: 3.9%

- AG: 0%
- ALR: 76%
- AL: 31%
Could you consider practicing a new operating technique?

49.6% Yes
50.4% No
• 50.4% in favor of practicing a new operating technique
Why change?

- Accelerate postoperative recovery: 40.6%
- Improve post-operative consequences: 37.5%
- Reduce the size of the scar: 29.7%
- Simplify the care path: 21.9%
- Reduce the risk of complications: 15.6%
- Reduce intervention time: 12.5%
- Others (commercial interest, expanding the range of techniques, fun, etc.): 9.6%
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• 49.6% want to keep their current operating technique

• Why not?

  • Reliability and efficiency of the technique you currently use: 100%
  • Need for additional equipment and materials: 31.3%
  • Lack of evidence on the safety of other techniques: 28.1%
  • Intervention time increased by other techniques: 26.6%
  • Lack of evidence on the effectiveness of other techniques: 21.9%
  • Need for additional training: 10.9%
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Could you consider changing the type of anesthesia?
• 48.8 % in favor of practicing a new anesthetic technique
Why change?

• Simplify the treatment process: 71%
• Be independent about anesthesia: 56.5%
• Improve patient comfort: 35.5%
• No longer using a pneumatic tourniquet: 32.3%
• Carry out the intervention in an adapted consultation room: 30.6%
• Reduce the risk of postoperative hematoma: 4.8%
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- Reduce the risk of postoperative hematoma: 4.8%
• 51.2% want to keep their current anesthetic technique

• Why not?

  • Reliability and efficiency of the technique you currently use: 97%
  • Possible conflict with the anesthetic team: 19.7%
  • Duration of intervention increased by the anesthetic time performed by the surgeon: 19.7%
  • Probable lower effectiveness of other techniques: 9.1%
  • Probably lower safety of other techniques: 9.1%
  • Need for additional training: 4.5%
  • Need for additional equipment and materials: 3%
• 51.2% want to keep their current anesthetic technique

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• Probably lower safety of other techniques: 9.1%  
• Need for additional training: 4.5%  
• Need for additional equipment and materials: 3%
Compared to the USA (2015)


- Response rate 30% (716/2413) American Society of Surgeons of the Hand (ASSH)

**Surgery:**
- Open: 70%
- Endoscopic: 26%
- Other: 4%

**Anesthesia:**
- IV sedation + local: 43%
- Regional: 30%
- General: 11%
- Other: 16%
Compared to Canada (2018)


- Response rate 46% (183/400) Canadian Society of Plastic Surgery (CSPS)

**Surgery:**
- Open: 95%
- Endoscopic: 5%

**Anesthesia:**
- Local: 54%
- Regional: 12%
- IV sedation + local: 3%
- General: 0.5%

**Location:**
- Local procedure room: 88%
- General operating room: 8%
- Office: 4%
CONCLUSION

• High frequency of endoscopy and loco-regional anesthesia

• Half of surgeons in favor of changing surgical and/or anesthetic techniques

• Evolution :
  • Towards an increase in the use of endoscopy or ultrasound-guided release?
  • Towards local anesthesia?
Thank you for your attention