

Obturator nerve

see [obturator nerve transfer](#)

In patients presenting with predominantly motor symptoms, some groups routinely biopsy mixed or pure motor nerves such as the the obturator nerve branch to the gracilis muscle ¹⁾.

Thirteen patients with unilateral dense facial paralysis underwent a one-stage facial reanimation with a gracilis flap powered by a double donor neural input, provided by both the ipsilateral masseteric nerve (coaptation by an end-to-end [neurorrhaphy](#) with the obturator nerve) and the contralateral facial nerve (coaptation through a cross-face nerve graft: end-to-end neurorrhaphy on the healthy side and end-to-side neurorrhaphy on the obturator nerve, distal to the masseteric/obturator neurorrhaphy) ²⁾.

Block

Ultrasound standard for obturator [nerve block](#): the modified Taha's approach ³⁾.

¹⁾

Abouzahr MK, Lange DJ, Latov N, Olarte M, Rowland LP, Hays AP, et al.: Diagnostic biopsy of the motor nerve to the gracilis muscle. Technical note. J Neurosurg 87:122-124, 1997

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Sforza C, Frigerio A, Mapelli A, Tarabbia F, Annoni I, Colombo V, Latiff M, Pimenta Ferreira CL, Rabbiosi D, Sidequersky FV, Zago M, Biglioli F. Double-powered free gracilis muscle transfer for smile reanimation: A longitudinal optoelectronic study. J Plast Reconstr Aesthet Surg. 2015 Jul;68(7):930-9. doi: 10.1016/j.bjps.2015.03.029. Epub 2015 Apr 21. PubMed PMID: 26026222.

³⁾

Lin JA, Nakamoto T, Yeh SD. Ultrasound standard for obturator nerve block: the modified Taha's approach. Br J Anaesth. 2015 Feb;114(2):337-9. doi: 10.1093/bja/aeu467. PubMed PMID: 25596216.

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