

Luigino SANTECCHIA M.D.

SENIOR CONSULTANT Plastic And Maxillofacial Surgery at "Bambino Gesù" Children's Hospital - Rome -

luigino.santecchia@me.com

Research Fellowship in Plastic
Reconstructive Microsurgery -
Director Prof. HUNG CHI CHEN at
China Medical University
January 2017 - June 2017

Summary

DOCTOR IN CHARGE ON RECONSTRUCTIVE MICROSURGERY

Expertise In Plastic Reconstructive And Aesthetic Surgery.

Cranio-Maxillo-Facial Surgery.

Surgical Treatment of Congenital Malformations

Surgical Treatment of Vascular Anomalies.

Pediatric Hand Malformations And Traumas

Complex Microsurgical Reconstructions

Reconstructive procedures with micro flaps on all body areas, especially head and neck, hand and limbs.

Surgical Treatment of Vascular Anomalies, directed to lymphedema surgery with lymph node transfer and liposuction integrated packages. Modified procedures of volume reduction of the limbs with modified Charles procedure, maintaining the integrity of the perforating vessels in lymphedema staged III-IV

Experience

SENIOR CONSULTANT IN PLASTIC AND MAXILLOFACIAL SURGERY at "BAMBINO GESÙ" CHILDREN'S HOSPITAL - ROME -

gennaio 1996 - Presente (20 anni 8 mesi)

DOCTOR IN CHARGE ON RECONSTRUCTIVE MICROSURGERY

PEDIATRIC HAND SURGERY AND MALFORMATIONS
HEMANGIOMAS AND VASCULAR MALFORMATIONS
CONGENITAL MALFORMATIONS OF HEAD AND NECK
AESTHETIC AND RECONSTRUCTIVE RHINOPLASTY
LIPOSUCTION
CLEFT LIP AND PALATE
FLAPS
HYPOSPADIA
GIANT NEVI
BURN SEQUELAE
SKIN SURGERY

RESIDENT in Plastic Reconstructive and Aesthetic Surgery at Catholic University - School of Medicine at Policlinico Agostino Gemelli of Rome

gennaio 1990 - luglio 1995 (5 anni 7 mesi)

AESTHETIC AND RECONSTRUCTIVE RHINOPLASTY
LIPOSUCTION
EYELIDS AND FACE LIFT

EXPERIMENTAL MICROSURGERY IN RATS
EXPERIMENTAL SURGERY ON SHEEP FOETUSES IN CLEFT LIP AND PALATE
BURNS SURGERY
SKIN CANCER ONCOLOGY AND RECONSTRUCTIONS
BREAST CANCER AND RECONSTRUCTIONS
HYPOSPADIA
MYIOCUTANEOUS FLAPS
SKIN GRAFTS
FOUNDAMENTALS IN PLASTIC SURGERY

POSTGRADUATED IN PLASTIC RECONSTRUCTIVE AND AESTHETIC SURGERY at Catholic University of Sacred Heart

gennaio 1990 - luglio 1995 (5 anni 7 mesi)

DISCUSSION OF THE THESIS ON "EMERGENCY AND LATE NERVE MICROSUTURES"
70/70 cum LAUDE

LIEUTENANT MEDICAL OFFICER OF ITALIAN AIR FORCE at SARAM Macerata

luglio 1991 - luglio 1992 (1 anno 1 mese)

Unlimited Leave for Military Service since 2010

Courses

RESIDENT in Plastic Reconstructive and Aesthetic Surgery

Catholic University - School of Medicine at Policlinico
Agostino Gemelli of Rome
30th Course on Microsurgery

Timisoara (RO) April 2012

SENIOR CONSULTANT IN PLASTIC AND MAXILLOFACIAL SURGERY

"BAMBINO GESÙ" CHILDREN'S HOSPITAL -
ROME -

1st Course on Perforators on Pigs

Naples 1-3 July 2015

6th Perforator Flaps on Pigs

Timisoara May 2015

4th Micro Flaps and Perforators Flaps

Timisoara - April 2014

31st Course on Microsurgery

Timisoara 17-21-Oct 2012

Dissection Course on Upper Limb Reconstruction

5-7 December 2013 -Arezzo

1st Course on CLP/CP

Rome 26-29-Nov 2012

Corso Pratico Dissezione Lembi Microchirurgici

Novembre 2012 - Bordeaux

Publications

Surgical Treatment of Giant Frontonasal Infantile Haemangiomas

SciMedCentral - Journal of Dermatology and Clinical Research 1 luglio 2016

Autori: Luigino SANTECCHIA M.D., Luca Piombino, Stefano Campa, urbano urbani, Guido Ciprandi, Mario Zama

Infantile hemangiomas, also known as “haemangiomas of infancy,” (IHs) are common benign tumors of endothelial cells characterized by a unique pattern of rapid proliferation that occurs in the first months of life, followed by slow involution that may take years to complete. They reportedly occur in as many as 12% of children and are frequently brought to the attention of plastic surgeons, dermatologists, and paediatricians. Although most are ultimately of little significance, a portion have the potential concern to produce complications. Hemangiomas of the fronto-nasal region are frequent, and create scare to parents and doctors for reasons related to their considerable size, the critical reduction of the visual field, the ulceration, the risk of direct trauma and critical bleeding, and not least the activation of psychological aspects, if you opt to drug therapy for a conservative approach. The authors present some cases of giant hemangioma of the fronto-nasal region, surgically treated at an early stage, with scar contained in the aesthetic units where appropriate, with satisfactory clinical results appreciated by the parents of the young patients.

SURGICAL MANAGEMENT OF DOG BITES IN A NEONATE

Paediatrics Today 22 settembre 2015

Autori: Luigino SANTECCHIA M.D., Fiammetta PIERSIGILLI², Barbara IACOBELLI², Guglielmo SALVATORI², Cinzia AURITI²*

Objective – To describe a rare case of a very young female infant who suffered life threatening injuries by the family owned pet dog because she was ravaged at 10 days of life. Case report – The clinical conditions and vital signs of the infant on admission were stable. The buccal tissue presented multiple lacerations and the oral cavity was obstructed by multiple blood clots. Plastic surgery reconstruction was undertaken according to functional and aesthetic requirements. Antibiotic prophylaxis, tetanus vaccine and specific immunoglobulin were administered to the baby. Wound healing was excellent, despite contaminated wounds. Early and long term results of the intervention of reconstructive surgery are shown. We also review the literature to understand the background of this unexpected accident and its possible prevention. Conclusions – In children injuries by dog bites can be life-threatening, often imply aesthetic problems, as they involve mostly the neck and the head, and require medical and challenging surgical treatments. Despite the fact that

infections do not occur frequently, in neonates, because of the lack of an efficient immune response, it is highly recommendable to start antibiotics and perform tetanus immunization together with the administration of specific immunoglobulins.

Surgery for Lip Haemangiomas: A New Score of Severity, to Predict Functional and Cosmetic Results, according to the Aesthetic Units of the Face.

Plastic & Reconstructive Surgery

Autori: Luigino SANTECCHIA M.D.

August 2015 - Volume 136 - Issue 2S - p 445

doi: 10.1097/01.prs.0000470729.29127.33

EPSRC 2015 Abstract Supplement 2S

pp: 432-446

Vascular Anomalies Guidelines by the Italian Society for the study of Vascular Anomalies (SISAV)

International Angiology 1 aprile 2015

Autori: Luigino SANTECCHIA M.D., Stillo F. 1, Baraldini V. 2, Dalmonte P. 3, El Hachem M. 4, Mattassi R. 5, Vercellio G. 6, Amato B. 7, Bellini

International Angiology 2015 Aprile;34(2 Suppl 1):1-45

Anomalie Vascolari della Regione Nasale: Timing Chirurgico e Algoritmo Ricostruttivo in uso presso il Centro Multidisciplinare dell'OBG

Dr. Luigino Santecchia 29 novembre 2014

Autori: Luigino SANTECCHIA M.D.

1st Prize in Poster Ranking at 2nd SISAV Congress - 28-29 November 2014 Milano

Long Oral Communication at 7th EPSRC Congress in Hamburg - 27-30 August 2015

in press on Plastic & Reconstructive Surgery - Special Issue September 2015

Laser Interstiziale a Diodo (980nm) Eco-Guidato (L.I.D.E.) nelle Anomalie Vascolari Pediatriche

Dr. Luigino Santecchia novembre 2014

Autori: Luigino SANTECCHIA M.D.

Poster at 2nd SISAV Congress - 28-29 November 2014 Milano

Ataluren treatment of patients with nonsense mutation dystrophinopathy

Issue Muscle & Nerve Muscle & Nerve Volume 50, Issue 4, pages 477–487, October 2014 1 settembre 2014

Autori: Luigino SANTECCHIA M.D., Katharine Bushby MD1,†, Richard Finkel MD2,†, Brenda Wong MD3, Richard Barohn MD4, Craig Campbell MD5, Giacomo

Keywords:

Duchenne muscular dystrophy;genetic;pediatric;nonsense mutation;orphan

ABSTRACT

Introduction: Dystrophinopathy is a rare, severe muscle disorder, and nonsense mutations are found in 13% of cases. Ataluren was developed to enable ribosomal readthrough of premature stop codons in nonsense mutation (nm) genetic disorders. Methods: Randomized, double-blind, placebo-controlled study; males #5 years with nm-dystrophinopathy received study drug orally 3 times daily, ataluren 10, 10, 20 mg/kg (N = 57); ataluren 20, 20, 40 mg/kg (N = 60); or placebo (N = 57) for 48 weeks. The primary endpoint was change in

6-Minute Walk Distance (6MWD) at Week 48. Results: Ataluren was generally well tolerated. The primary endpoint favored ataluren 10, 10, 20 mg/kg versus placebo; the week 48 6MWD # = 31.3 meters, post hoc P = 0.056. Secondary endpoints (timed function tests) showed meaningful differences between ataluren 10, 10, 20 mg/kg, and placebo. Conclusions: As the first investigational new drug targeting the underlying cause of nm-dystrophinopathy, ataluren offers promise as a treatment for this orphan genetic disorder with high unmet medical need. *Muscle Nerve* 50: 477–487, 2014

Santecchia L, Bianciardi Valassina MF (2014) Dog Bite in Newborn - The Surgeon Point of View.

J Dermatolog Clin Res 2(4): 1033. 6 giugno 2014

Autori: Luigino SANTECCHIA M.D.

Dog bites of the facial region are increasing in children according to the Center for Disease Control. Early estimation of infection risk, adequate antibiotic therapy and, if indicated, surgical treatment, are cornerstones of successful cures of bite wounds]. The first step in preventing this kind of accident is to identify the associated risk factors [3].

We describe a case of potentially lethal animal aggression, in a child of 10 days of age, savaged by owned dog, by race “Alpenlaendische Dachsbracken” within her home.

Santecchia, L. (2014). Thoracolumbar Myelomeningocele Bursting Primary Repair: Safe Multilayer Secondary Reconstruction Using a Latissimus Dorsi Muscle Flap.

Surgery Curr Res, 4(198), 2161-1076. 4 luglio 2014

Autori: Luigino SANTECCHIA M.D.

Study background: The authors present a case of a giant thoracolumbar myelomeningocele (T9-L5) in a newborn of 39 weeks. The goal of the procedure is to provide an amount of adequate cutaneous subcutaneous tissue, which allows an efficient coverage of the duraplasty, and reduces the risk of infections and the tissue stretching at the same time. Methods: Closure of the defect was achieved using a patch of fascia lata and soft tissues were reconstructed using latissimus dorsi muscular flap and a split thickness skin graft. Primary correction was performed immediately after birth, as a neurosurgical emergency. Few days after surgery, a complete dehiscence of the suture occurred. Result: We outline here a favourable outcome of a giant MMC bursting primar repair, using the LDMF. Follow-up is now at 2 years and local conditions are excellent. Conclusion: The use of Latissimus Dorsi Flap could be considered the first choice for treatment of giant myelomeningocele in newborn. It gives a higher chance of getting immediately the definitive and qualitatively better repair of the defect with reduced risk of local and systemic complications.

IMAGING FOR PLASTIC SURGERY - BOOK CHAPTER XIII - Vascular Anomalies in Children (Vascular Tumours and Vascular Malformations) Luigino SANTECCHIA, Piergiorgio FALAPPA, Mario ZAMA

Taylor & Francis Group - CRC Press - Edited by Luca Saba, Warren M.Rozen, Alberto Alonso-Burgos, Diego Ribuffo dicembre 2014

Autori: Luigino SANTECCHIA M.D., Piergiorgio Falappa, Mario Zama

The chapter looks at the vascular tumors and vascular malformations in children, framing the criteria for radiological diagnosis and surgical treatment.

The argument is accompanied by numerous images before and after treatment by means of which the authors define the indications and techniques for surgical and interventional radiologic treatment

The use of Interstitial echo-guided diode laser 980-nm for deep vascular anomalies in pediatric patients: a preliminary study

Surgical Techniques Development 1 settembre 2013

Autori: Luigino SANTECCHIA M.D., Maria Francesca Bianciardi Valassina, Guido Ciprandi, Rodolfo Fruhwirth, Mario Zama

A wide range of therapeutic options is available to treat vascular anomalies, arising from the systemic therapies to surgery or using lasers. The purpose of this preliminary study is to assess the effectiveness of treatment of vascular anomalies anywhere in the body, along with the use of interstitial echo-guided 980 nm diode laser. The analysis occurs through accurate angio (MRI) pre- and post-treatment measurements. We enrolled all the patients (16) affected on vascular malformations everywhere in the body, treated from January to August 2012. We obtained excellent results in 6 patients (37.5%) with mean mass reduction of 85%, good in 9 patients (56%) with mean mass reduction of 65% and unsatisfactory in 1 patient (6%). In pediatric patients, low-flow vascular malformations resistant to progressive sclerotherapy or in critical anatomical sites, benefit of echo guided interstitial 980- nm diode laser.

Early surgical excision of giant congenital hemangiomas of the scalp in newborns: clinical indications and reconstructive aspects.

J Cutan Med Surg. 2013 Mar-Apr;17(2):106-13. aprile 2013

Autori: Luigino SANTECCHIA M.D., Santecchia L, Francesca Bianciardi Valassina M, Maggiulli F, Spuntarelli G, De Vito R, Zama M.

Infantile hemangioma is the most common vascular tumor in newborns, with an incidence from 12 to 23% among preterm infants with low weight at birth and a female to male ratio of 3:1. The head and neck is the most frequently affected area (60%), and the scalp is a typical site for such large lesions. Objective: We describe some clinical and medical aspects in comparison with the surgical approach to giant infantile hemangioma of the scalp. Methods: The indications to treatment are discussed. An outcome basis evaluation, by reviewing some clinical cases, is provided to help readers better understand when and how to undergo surgery safely. Conclusion: Early excision of huge infantile hemangioma of the scalp is the treatment of choice if feasible within 5 months of age.

Minor salivary gland neoplasm in children

J Craniofac Surg 24(2):664-667,2013 febbraio 2013

Autori: Luigino SANTECCHIA M.D., Spuntarelli, Giorgio MD; Santecchia, Luigino MD; Urbani, Urbano MD; Zama, Mario MD

In this article, we present a review of the literature, and we focus on 2 particular cases of cancer of the salivary glands accessory in pediatric patients. The accessory parotid is the site of congenital and acquired lesions. In adults, the acquired lesions are often neoplastic and are usually similar to those seen in the main parotid gland. The disorders in children are less well defined, as only a few cases have been reported.

The accessory parotid gland, or accessory parotid, is a nodule of normal salivary tissue separated from the main parotid gland, located on the masseter muscle, to which it is bound by an extension of the masseteric fascia and connected to the Stensen duct at that level. In contrast to the extensive literature on acquired lesions of the accessory parotid in adults, very few cases of malignant or benign lesions of the accessory parotid in children could be found in the literature. A review of several articles reporting lesions of the accessory parotid in adult patients, reporting 3 or more cases each for a total of 71 patients, showed 24 malignant neoplasms, 39 benign neoplasms, and 8 nonneoplastic lesions. Lesions of the accessory parotid are quite rare in children but should be considered when facing mass located in the cheek.

Juvenile active ossifying fibroma with massive involvement of the mandible

Plast Reconstr Surg 2004 Mar; 113(3):970-4 marzo 2004

Autori: Luigino SANTECCHIA M.D., Zama M, Gallo S, Santecchia L, Bertozzi E

Fibro-osseous lesions of the maxillofacial complex are often difficult to diagnose from both a clinical and a histopathologic point of view. The parameters for the diagnosis of juvenile active ossifying fibroma are as follows: a patient under 15 years of age, localization of the tumor, the radiologic aspect, and the tendency to recur. Although many authors favor conservative surgery rather than radical en bloc resection, immediate recurrence characterized by a high aggressive growth rate and the absence of a distinct separation between the tumor and the adjacent bone requires extensive surgery, with wide demolition of the involved bone.

Early reconstruction of the abdominal wall in giant omphalocele.

Br J Plast Surg. 2004 Dec;57(8):749-53. dicembre 2004

Autori: Luigino SANTECCHIA M.D., Zama M, Gallo S, Santecchia L, Bertozzi E, Zaccara A, Trucchi A, Nahom A, Bagolan P

Omphalocele is the most common congenital defect of the abdominal wall. Mortality rate is between 20 and 70% and early closure of the abdominal wall, within 10 days of life, is vital to the successful outcome of the surgical treatment. The authors describe the use of two bipedicled flaps of abdominal skin to correct the defect of the midline as soon as the reduction of all viscera has been accomplished.

Malignant tumors of the orbital region. Analysis of cases examined from 1986 to 1995.

Dermatol Surg. 1997 Jul;23(7):565-70. luglio 1997

Autori: Luigino SANTECCHIA M.D., Seccia A, Salgarello M, Bracaglia R, Sturla M, Santecchia L, Loreti A, Farallo E

To present a retrospective study of 154 orbital tumors examined from 1986 to 1995.

METHODS:

We analyzed the clinical behavior and the degree of local malignity also in relationship with the particular anatomical characteristics of this site.

RESULTS:

In this are, it is not rare finding tumors with a scarce cutaneous extension but a deep involvement including the bone, or of recurrences after a previous insufficient treatment with an aggressive clinical course.

CONCLUSION:

The principles for the surgical approach are: exeresis as radical as possible, one-stage operation for tumoral resection and reconstruction, bringing of trophic tissue able to sustain any complementary treatment, easy and fast execution, and short clinical course.

Surgery for Lip Haemangiomas: A New Score Of Severity, to Predict Functional And Cosmetic Results, According To The Aesthetic Units of The Face

7th EPSRC Congress - Hamburg 27 maggio 2015

Autori: Luigino SANTECCHIA M.D.

Lip Hemangioma is a challenge, because of the frequent pain and ulceration, that force the infant to interrupt feeding. The dismorphodynamic damage and psychosocial implications, make the initial lesion gradually more complex. " has been accepted by the scientific committee as a long oral presentation for the 7th European Plastic Surgery Research Council from August 27–30, 2015 in Hamburg, Germany!

All accepted long oral presentations (LOP) will be published in the Journal Plastic and Reconstructive Surgery (PRS). It is therefore imperative that you register for the meeting and present your paper. Please make use of the online or facsimile form on the conference website www.epsrc.eu.

Head and neck vascular lesions in childhood

J Cranio-Maxillofac Surg, 36 (Suppl. 1):131,2008 1 novembre 2008

Autori: Luigino SANTECCHIA M.D., F. Maggiulli, G. Spuntarelli, S. Latorre, L. Santecchia, M. Zama

Neoplasm of craniofacial skeleton in childhood

J Cranio-Maxillofac Surg, 36 (Suppl. 1):124,2008 1 novembre 2008

Autori: Luigino SANTECCHIA M.D., F. Maggiulli, G. Spuntarelli, S. Latorre, L. Santecchia, M. Zama

Significant craniofacial cleft in amniotic band syndrome

J Cranio-Maxillofac Surg, 36 (Suppl. 1):87,2008 1 novembre 2008

Autori: Luigino SANTECCHIA M.D., S. Latorre, M. Zama, G. Spuntarelli, L. Santecchia, F. Maggiulli, C. De Stefano

Facial growth in CLP patients treated by periostoplasty

J Cranio-Maxillofac Surg, 36 (Suppl. 1):46,2008 1 novembre 2008

Autori: Luigino SANTECCHIA M.D., G. Spuntarelli, F. Maggiulli, L. Santecchia, S. Latorre, M. Zama

Secondary treatment of CLP patients: the soft tissues

J Cranio-Maxillofac Surg, 36 (Suppl. 1):21,2008 1 novembre 2008

Autori: Luigino SANTECCHIA M.D., M. Zama, S. Latorre, G. Spuntarelli, L. Santecchia, F. Maggiulli

Secondary treatment of CLP patients: the facial skeleton

J Cranio-Maxillofac Surg, 36 (Suppl. 1):20,2008 1 novembre 2008

Autori: Luigino SANTECCHIA M.D., L. Santecchia, M. Zama, G. Spuntarelli, S. Latorre, F. Maggiulli

I nevi nevocitici. Diagnosi e trattamento chirurgico

EDITEAM s.a.s. gruppo editoriale, ISBN 88-87568-28-6,2001 1 gennaio 2001

Autori: Luigino SANTECCHIA M.D., C. De Stefano, L. Borghese, P. Cecchi, R. Pacifico, G. Palmieri, G. Proia, L. Santecchia, M. Vricella, M. Zama

Labiopalatoschisi. Inquadramento clinico e linee guida di trattamento

EDITEAM s.a.s. gruppo editoriale, ISBN 88-86023-78-2,1997 1 gennaio 1997

Autori: Luigino SANTECCHIA M.D., C. De Stefano, P. Cecchi, G. Proia, N. Guaricci, L. Borghese, M. Zama, G. Palmieri, L. Santecchia

Volunteer Experience

Voluntary Medical Doctor Plastic Surgeon at "Bambino Gesù" Children's Hospital - Humanitarian Missions

marzo 2010 - Presente

TANZANIA

ITIGI (SINGIDA) - MOROGORO - DAR ES SALAAM:

Burns Surgery, Cleft Lip and Palate, Hemangiomas, Tumors, Hand Surgery

2 BOTALLUS DUCTS coworker with CARDIOSURGEON

Test Scores

GRADUATED IN MEDICINE AND SURGERY

luglio 1990 Votazione:110/110 cum LAUDE

Experimental thesis on Prenatal surgery of Cleft Lip and Palate on the sheep fetus: first experimental experiences.

POSTGRADUATED IN PLASTIC RECONSTRUCTIVE AND AESTHETIC SURGERY

luglio 1995 Votazione:50/50 CUM LAUDE

DISCUSSION THESIS ON "EMERGENCY AND LATE NERVE MICROSUTURES"

50/50 cum LAUDE

Organizations

E.P.S.R.C. (European Plastic Surgery Research Council)

Associate Member

agosto 2013 a Presente

Chair in Craniofacial Anomalies Session (Peter Neligan, Jesse Selber, Luigino Santecchia)

at 5th Congress August 24-27, 2013 - helded in Hamburg - Germany - DEU

S.I.C.P.R.E. - (Società Italiana di Chirurgia Plastica Ricostruttiva ed Estetica)

Socio Aderente dal 1992

gennaio 1992 a Presente

S.I.S.A.V. (Società Italiana per lo Studio delle Anomalie Vascolari)

associate member

giugno 2012 a Presente

S.I.C.M. (SOCIETA' ITALIANA CHIRURGIA DELLA MANO)

Associate Member

marzo 2014 a Presente

S.I.M. - (Società Italiana Microchirurgia)

luglio 2015 a Presente

Istituto della Mano di Roma <http://www.istitutodellamano.it>

Affiliate

novembre 2013 a Presente

The Institute of Hand of Rome was born with the same characteristics of the 'Institut de la Main de Paris, with the collaboration of Prof. Alain Gilbert, Piero Raimondi and Dr. Enrico Margaritondo. Are part of the Institute of Hand also Prof. Philippe Valenti, Professor Leclercq, and Prof. Francesco Brunelli, from Paris. The institute is concerned with the study of the upper limb, in particular are addressed upper limb disorders including congenital malformations and diseases of the brachial plexus

Projects

POLAND SYNDROME

May 2013 to Present

Membri:Luigino SANTECCHIA M.D., Anwar Baban, Digilio Cristina, Bruno Dallapiccola, Giacomo Pongiglione

Poland's Syndrome is described as an absence or underdevelopment of the chest muscle (pectoralis) on one side of the body and webbing of the fingers (cutaneous syndactyly) of the hand on the same side (ipsilateral hand). Sometimes referred to as "Poland anomaly," it is a rare condition present at birth (congenital). For people born with Poland's Syndrome, the breastbone portion (sternal) of the pectoralis is also missing. The severity of Poland's Syndrome differs from person to person and is often not diagnosed or reported. The incidence, therefore, is difficult to determine, but current estimates are between one in 10,000 to one in 100,000 births. Poland's Syndrome is three times more common in boys than girls, and affects the right side of the body twice as often as the left. The reasons for these differences are unknown, as is the cause.

Signs of Poland's Syndrome

Very Frequent Signs - abnormal gastrointestinal tract (digestive system), absent pectoral muscles (muscles of the chest), brachydactyly (shortness of the fingers), dextrocardia (heart is on the right side of the body), diaphragmatic hernia/defect, humerus (bone of the upper arm) absent/abnormal, liver/biliary tract anomalies, maternal diabetes, oligodactyly (missing fingers), radius (bone of the lower arm), absent/abnormal, rhizomelic micromelia, syndactyly of fingers (fused together), ulna (bone of the lower arm) absent/abnormal, upper limb asymmetry (arms not symmetrical) - Frequent Signs

abnormal rib, hypoplastic (underdeveloped)/absent nipples, scapula (shoulder blade) anomaly

Occasional Signs - agenesis/hypoplasia (underdevelopment) of kidneys, encephalocele/exencephaly (prutrusion of brain tissue), abnormal morphology of hypothalamic-hypophyseal axis, abnormal function of hypothalamic-hypophyseal axis, microcephaly (smaller circumference of head), preaxial polydactyly, ureteric anomalies (reflux/duplex system), vertebral segmentation anomaly -Orpha.net

RECONSTRUCTIVE MICROSURGERY

January 1994 to Present

Membri:Luigino SANTECCHIA M.D., DEVOTED TEAM TO RECONSTRUCTIVE MICROSURGERY

Single or Composite fabric reparation losses after traumas, tumors, malformations, through a "modular" integrated approach, in which likewise to the substitutive forms of a car, he intervenes on the patient with auto-harvesting of "forms homologous tissues or area donor" for then "to connect them with micro techniques through vascular anastomosi" on the damaged receiving area.

It constitutes the technique of Simple or Composite Tissues AutoTransplant or also VASCULARIZED GRAFTS

PEDIATRIC HAND SURGERY

January 1997 to Present

Membri:Luigino SANTECCHIA M.D.

Pediatric hand surgery handles to correct the congenital malformations and traumas, using techniques of magnification that favor the best visualization of these small structures. Revascularizations, Reimplants, Transfers of fingers are employed in this sector, besides the traditional surgery

DIODE LASER IN VASCULAR ANOMALIES

January 2010 to Present

Membri:Luigino SANTECCHIA M.D., Fellow in Plastic Surgery

Methodic complementary to the classical Endovascular Angioradiologic Sclerosis employed in the deep Malformations to low flow and in the Giant Hemangiomas

SURGERY ON HEMANGIOMAS AND VASCULAR MALFORMATIONS

January 1990 to Present

Membri:Luigino SANTECCHIA M.D., Vascular Anomalies Center

The Surgery of the Hemangiomas also handles to precociously Remove the Vascular Anomalies in patient below the year of life, once that has introduced the risk of bleeding, of infection, oin case of deformity of the bodily image, above all of the cephalic extreme.

Some forms represent some true urgencies to treat quoad vitam or valetudinem

Experimental Microsurgery

February 2012 to Present

Membri:Luigino SANTECCHIA M.D.

The Microsurgery Laboratory is critical to the microsurgeon for the purpose of training the microsutures and the experimental approach to the various clinical flaps and grafts. The activity constitutes a continuing gym in which the surgeon who is interested in the Reconstructive microsurgery cannot give up

Languages

English

(Conoscenza professionale completa)

French

(Conoscenza professionale)

Skills & Expertise

Facial Plastic & Reconstructive Surgery

Reconstructive Microsurgery

Classic Music, Jazz and Progressive Rock

Travel Photography

Vascular Anomalies, Hemangiomas and Vascular Malformations
Cranio-MaxilloFacial Surgery
Pediatric Hand Surgery
Rhinoplasty
Plastic Surgery
Craniofacial Surgery
Surgery
Reconstructive Surgery
Pediatrics
Treatment
Microsurgery
Vascular
Healthcare
Clinical Research
Medical Education
Hospitals
Healthcare Management
Hand Surgery

Education

Victor Babes Timisoara

Alta Specializzazione in Microchirurgia Ricostruttiva, 29th And 30th Microsurgery Course, 2012 - 2012

Grade: Top of Trainees

Activities and Societies: .

Ecole de Chirurgie Paris

Cours au Lembau du Membre Superior, Chirurgie de la Main, 1994 - 1994

Università Cattolica del Sacro Cuore

Laurea in Medicina e Chirurgia, Medicina, 1984 - 1990

Interests

Film and Digital Photography

Editing

Leica M Cameras

Hasselblad film Cameras

Rolleiflex Film Cameras

Luigino SANTECCHIA M.D.

SENIOR CONSULTANT Plastic And Maxillofacial Surgery at "Bambino Gesù" Children's Hospital - Rome -

luigino.santecchia@me.com



[Contact Luigino on LinkedIn](#)