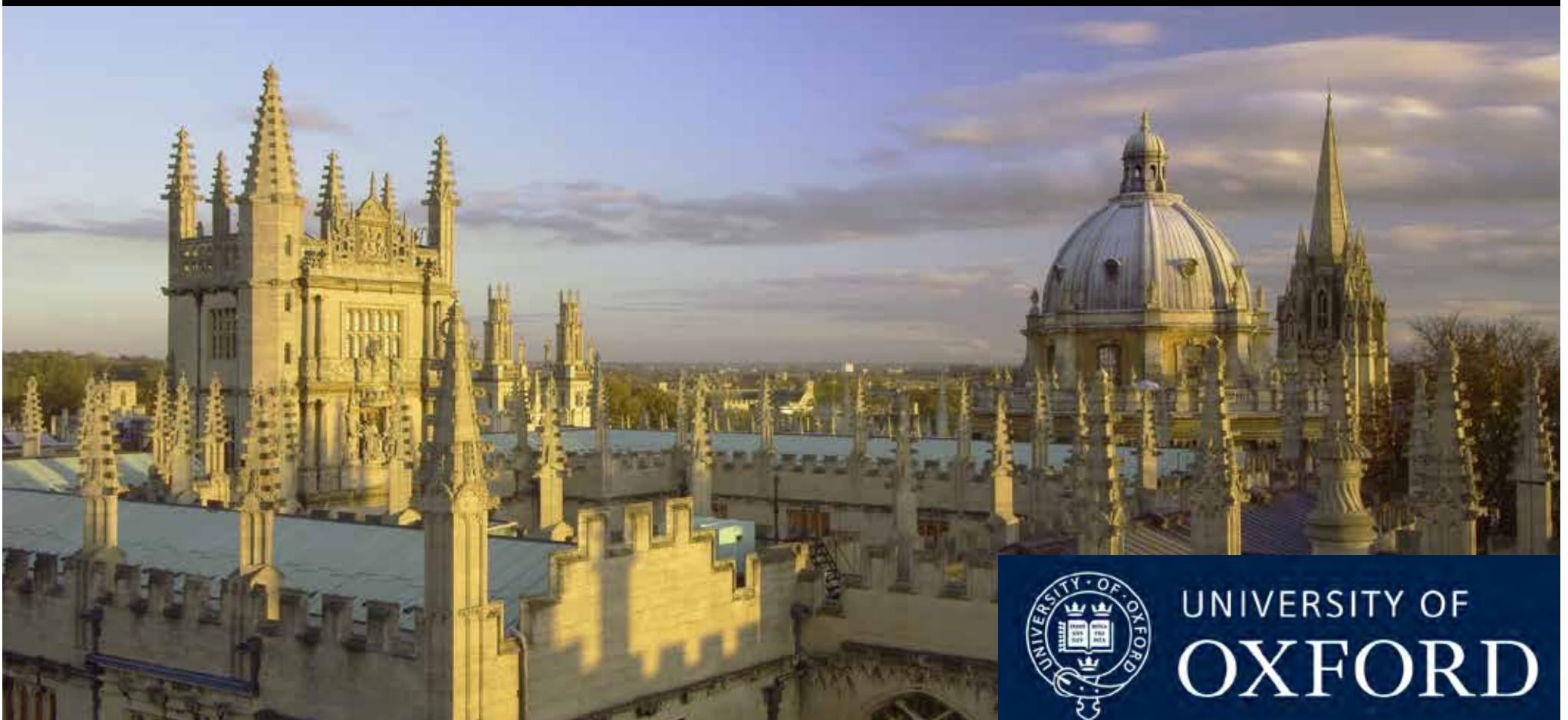


# Entrapment am Thoracic Outlet?

[www.neuro-research.ch](http://www.neuro-research.ch)

A/Prof Annina Schmid



UNIVERSITY OF  
**OXFORD**



# Klassifikation von TOS

- Vaskulaer (~5-10%)
  - arteriell
  - venoes
- Neurologisch (~90-95%)
  - klassisch (true)
  - unspezifisch
- Neuro-vaskulaer
- Muskuloskeletal
  - unspezifisch

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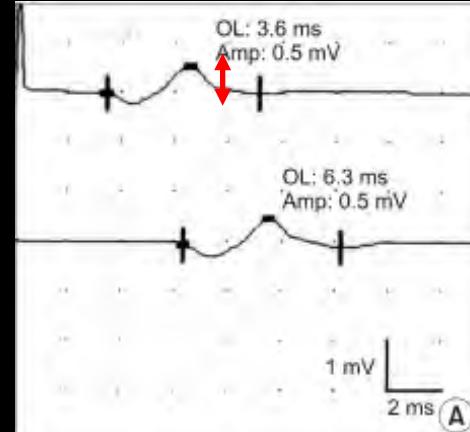
# Case report

(Lee et al 2011)

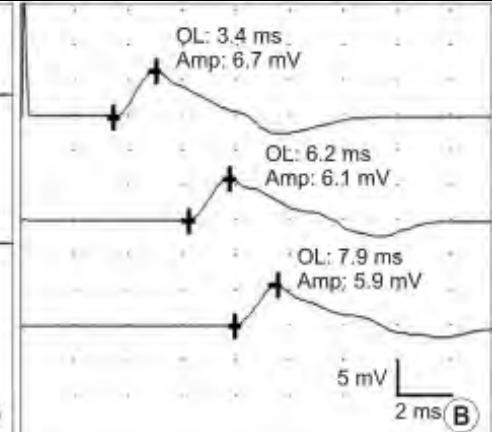


motorisch

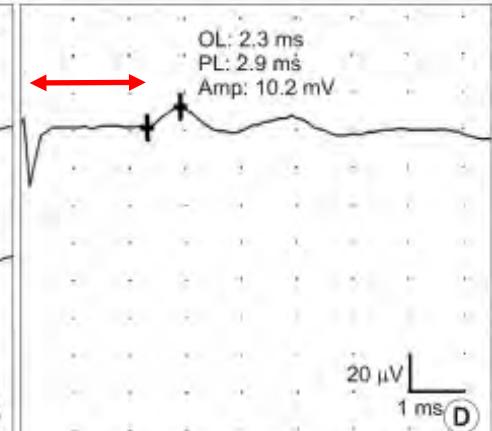
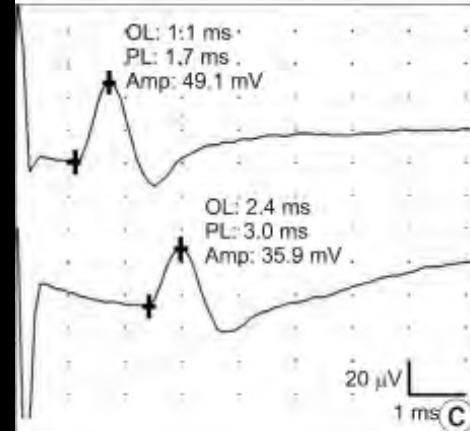
median



ulnar



sensorisch



# Untersuchung



# Unspezifisch neurogen



## Symptome:

- Paraesthesiae
- Schmerz
- Hyperalgesie



## Zeichen:

- Neurale Mechanosensitivitaet
  - Neurodynamische Teste
  - Palpation
  - Provokationsteste
  - Tinel's sign

# Mechanismen



# Druckgradient



Arterie > Kapillare > Nerv Faszikel > Vene > Skalenus Dreieck

Sunderland 1976

# Ischaemie

Tiermodelle (Rydevik 1981)

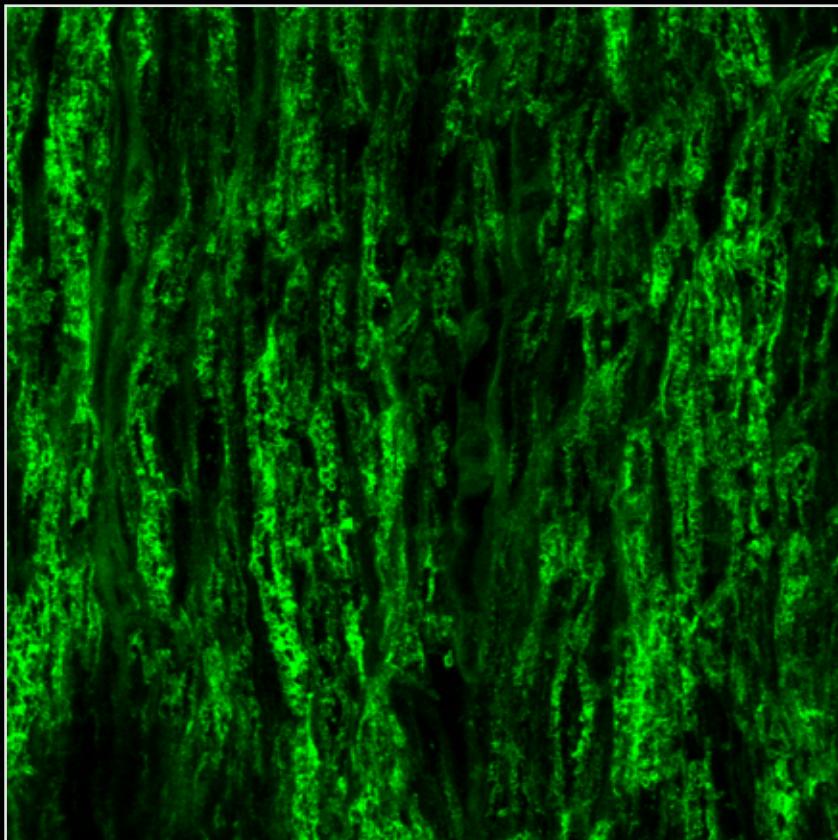
- 20-30 mmHg: ↓ venoese Zirkulation
- 40-50 mmHg: ↓ arterielle und kapillaere Zirkulation

Menschen (Lundborg 1982)

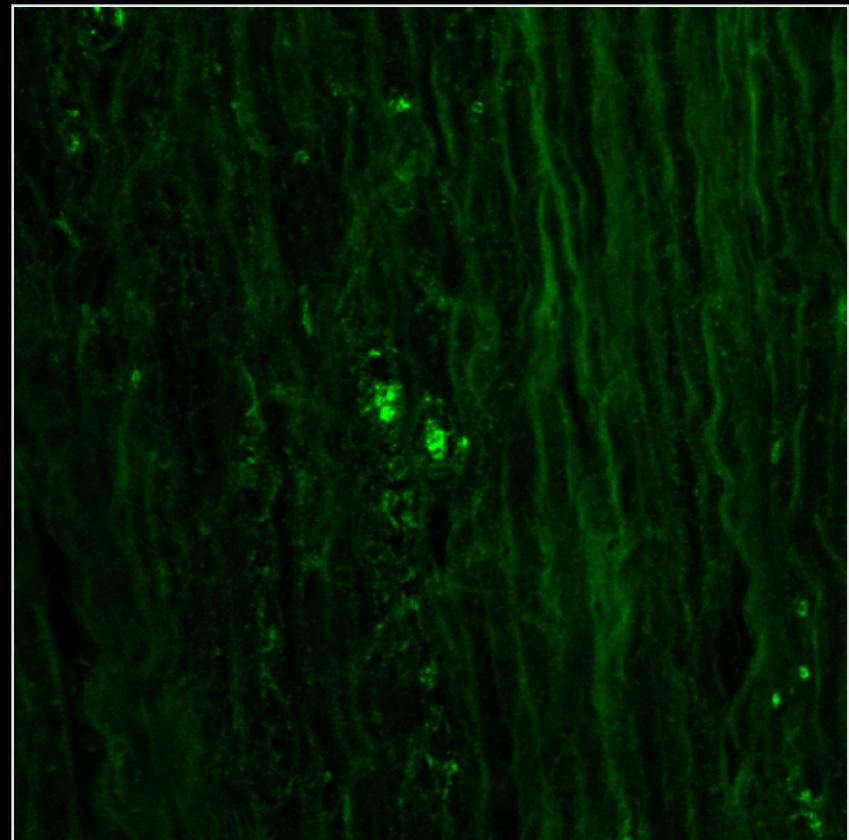
- 30 mmHg: Paraesthesiaen, ↓ Nervenleitgeschwindigkeit

# Lokale Demyelinisierung

kontralateral



Läsion



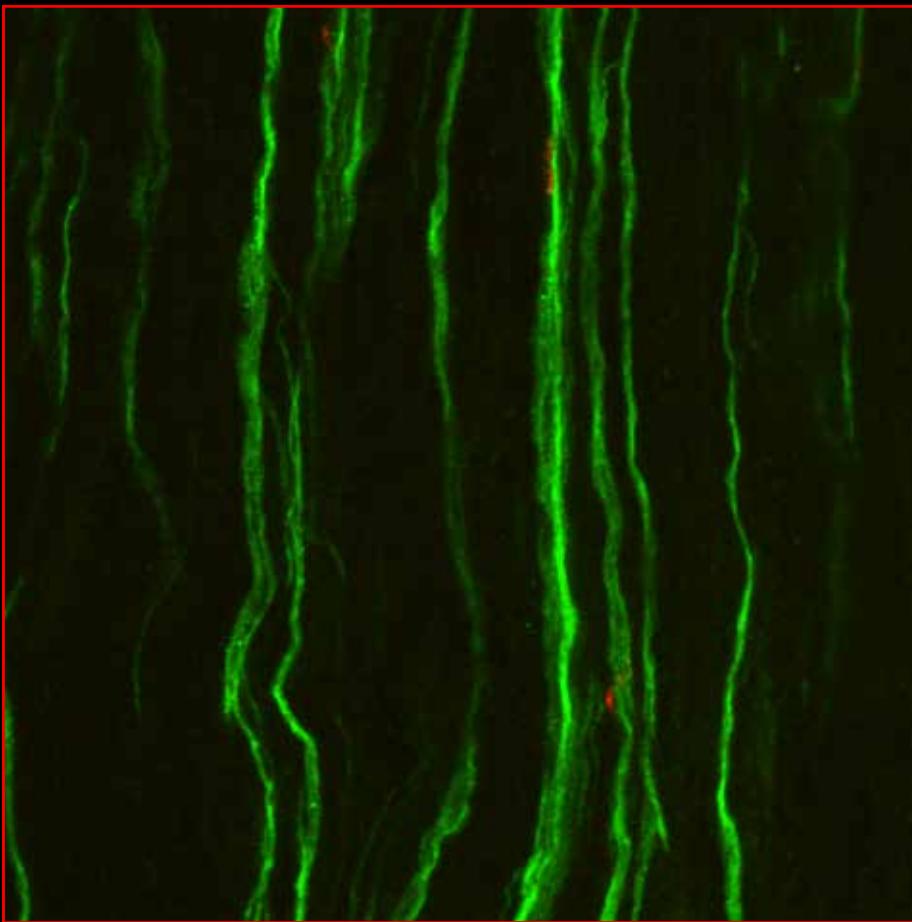
● Myelin basic protein

Schmid et al 2013

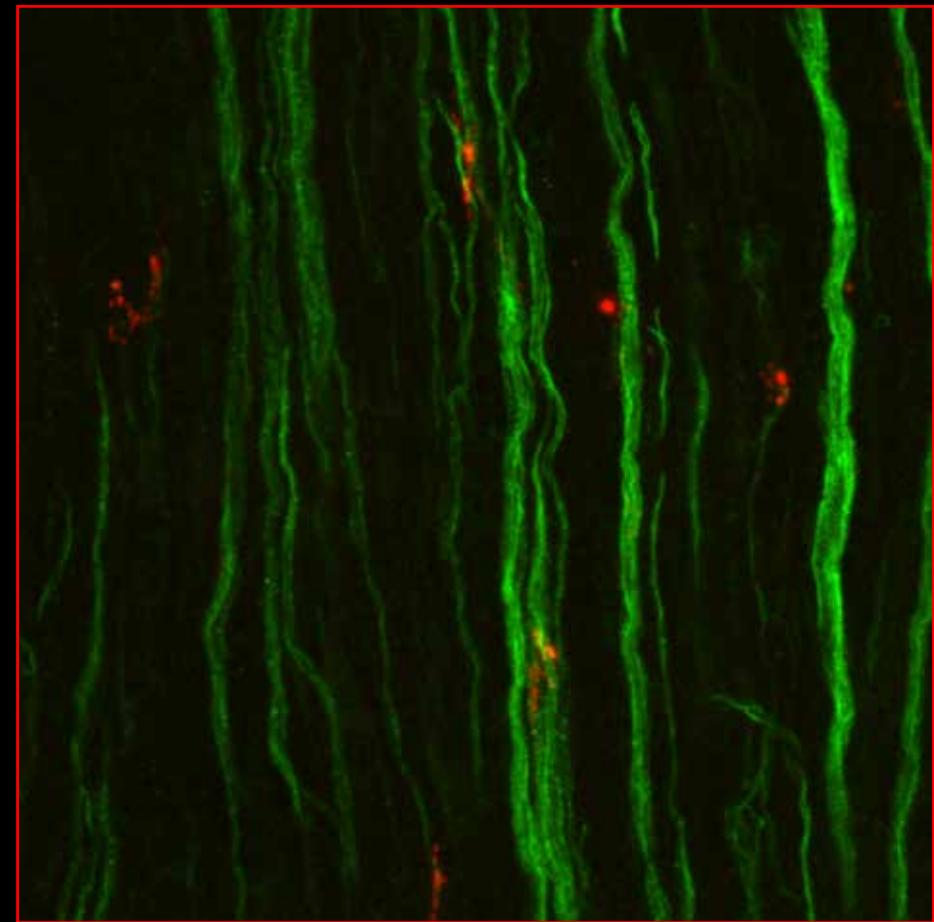


# Intraneurale Entzündung

kontralateral



Kompression



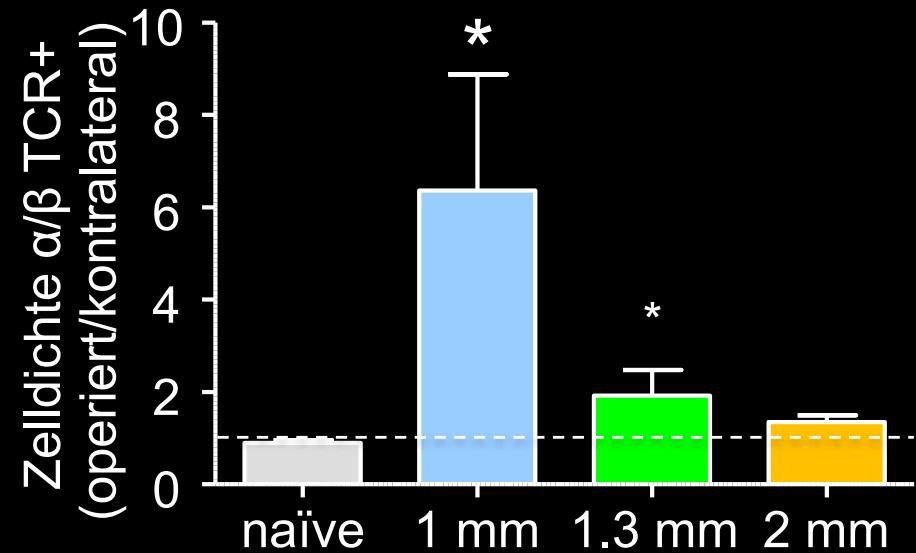
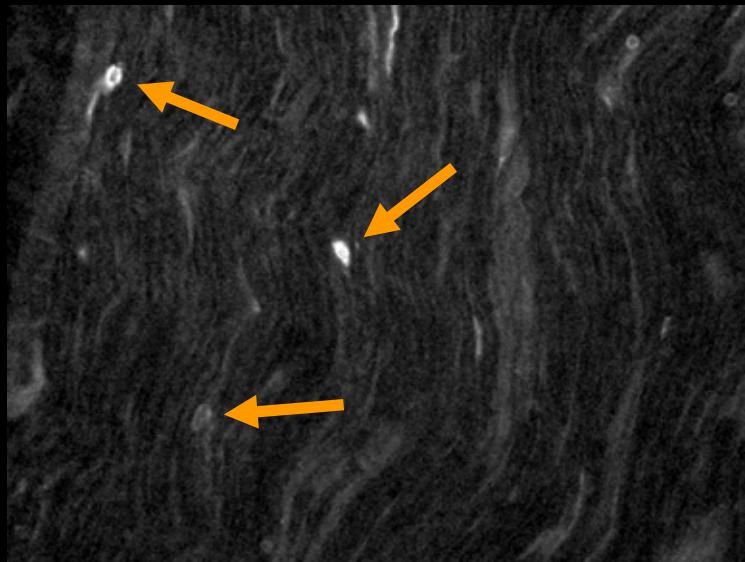
● CD68<sup>+</sup> Makrophagen ● GFAP<sup>+</sup> Schwannzellen

Schmid et al 2013



# Intraneurale Entzündung

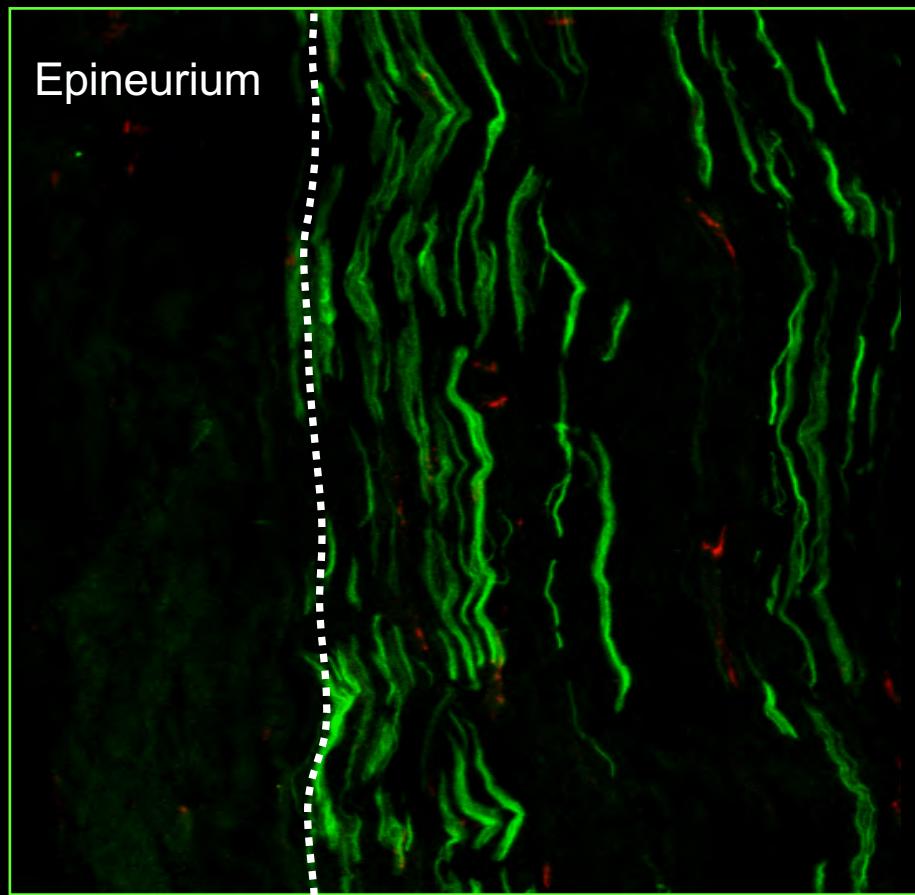
Kompression:  $\alpha/\beta$  TCR



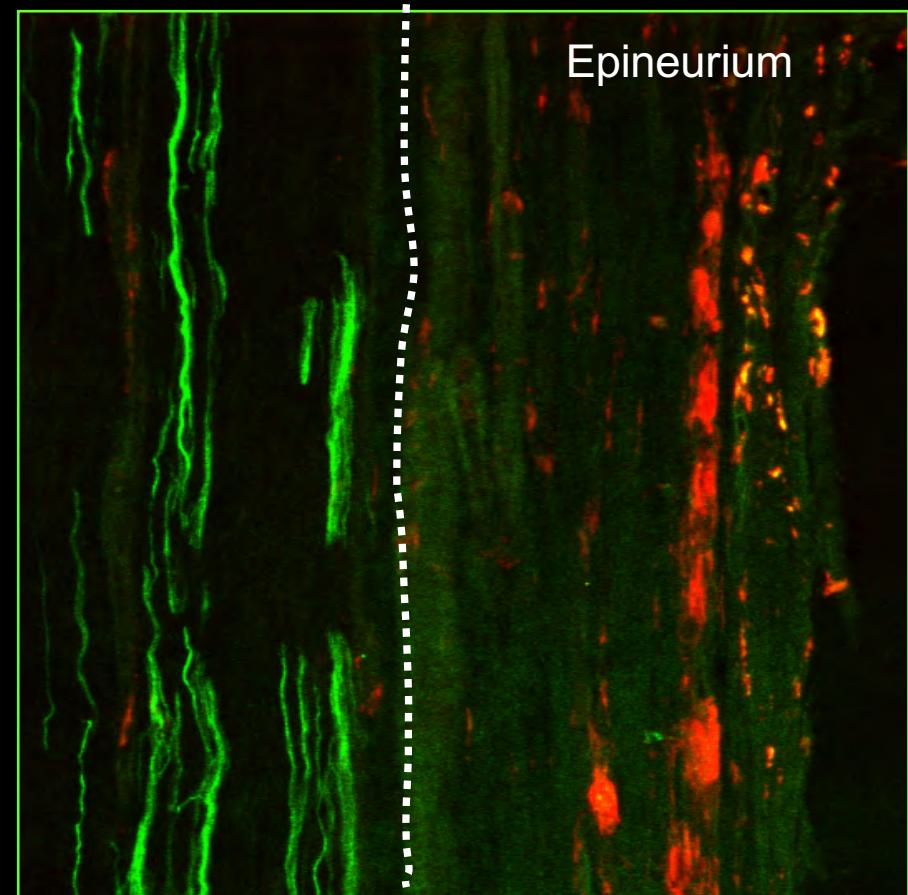
Kruskal-Wallis  
p=0.021

# Epineurale Entzündung

kontralateral



Kompression



● CD68<sup>+</sup> Makrophagen ● GFAP<sup>+</sup> Schwannzellen

Schmid et al 2013

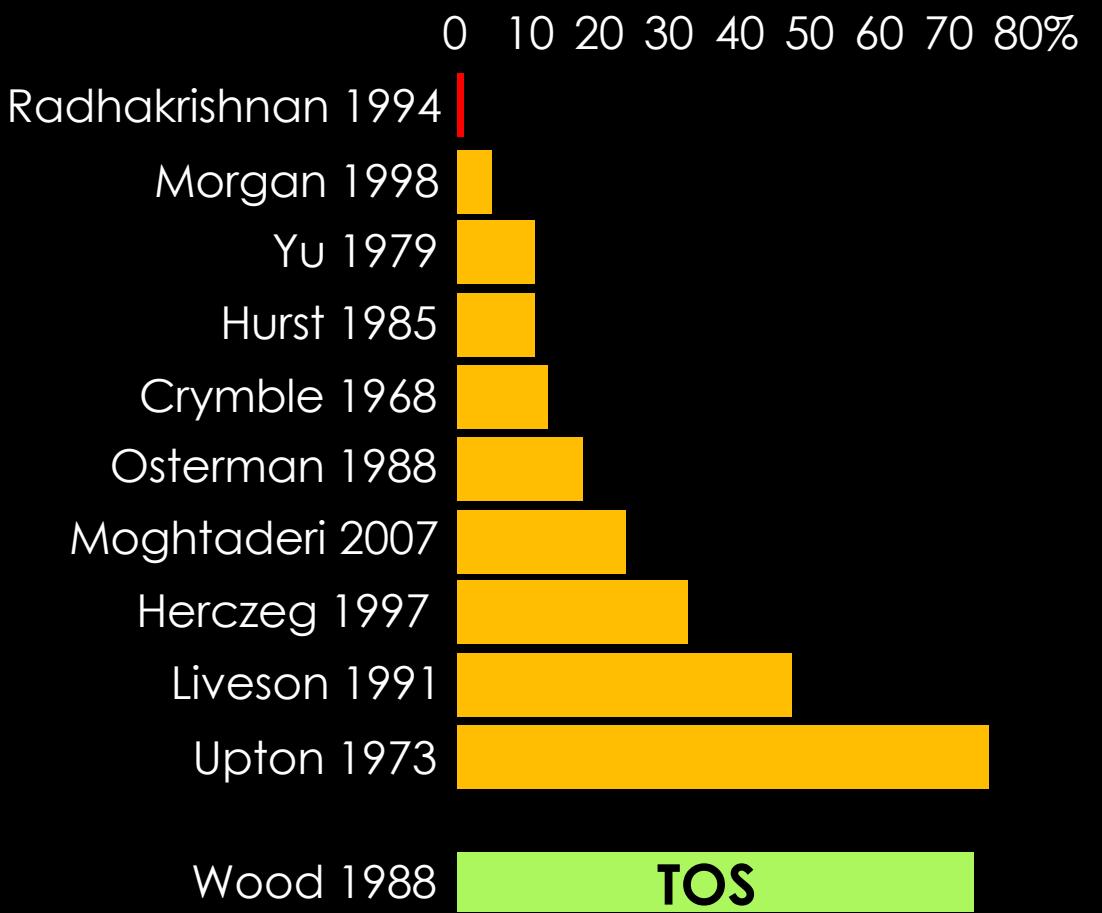


# Nervi Nervorum

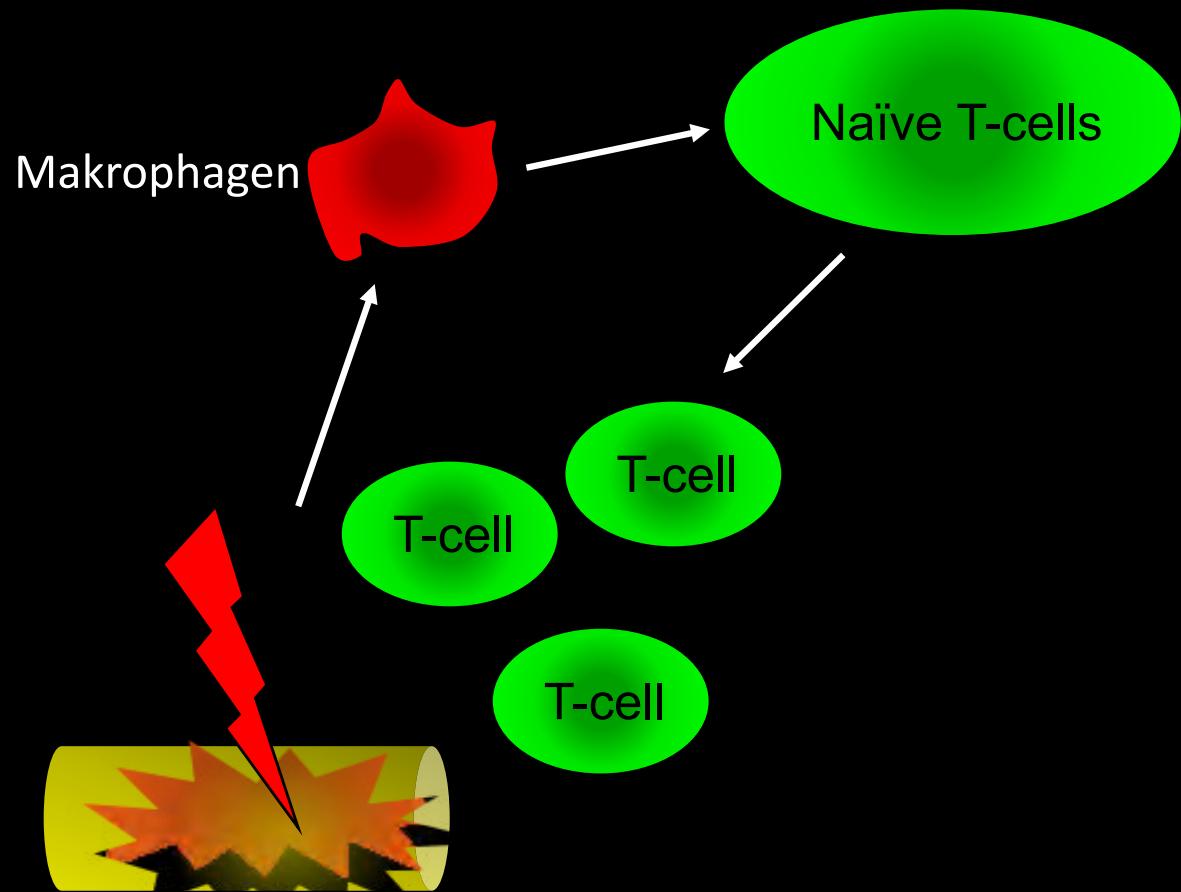


Hromada 1963

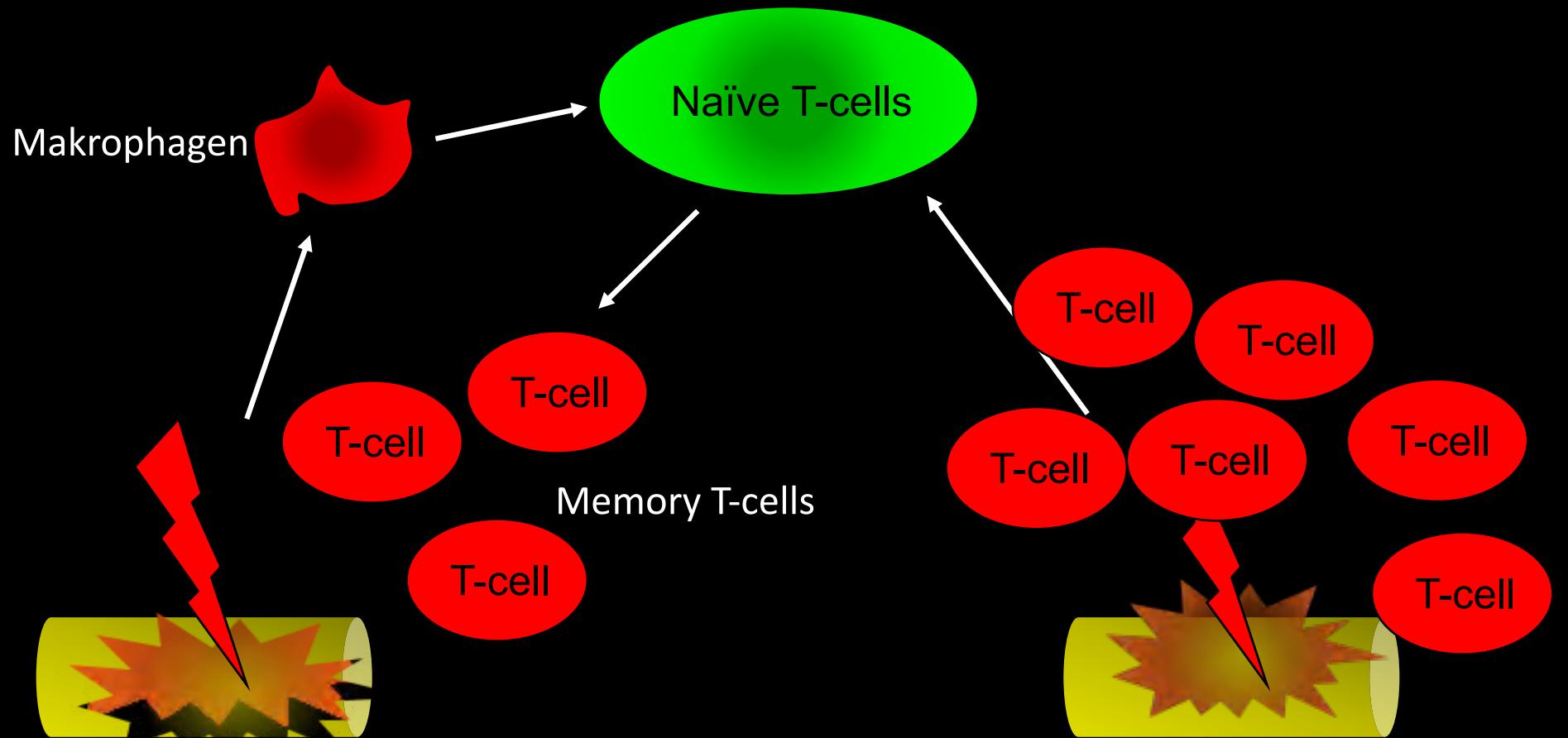
# Double Crush Syndrom?



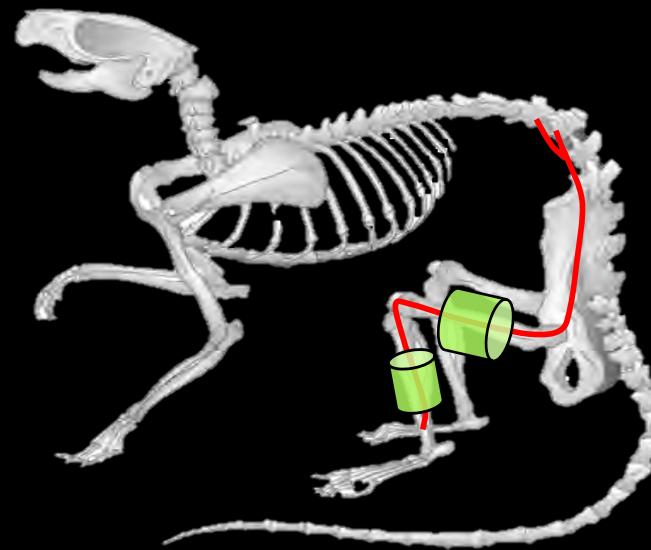
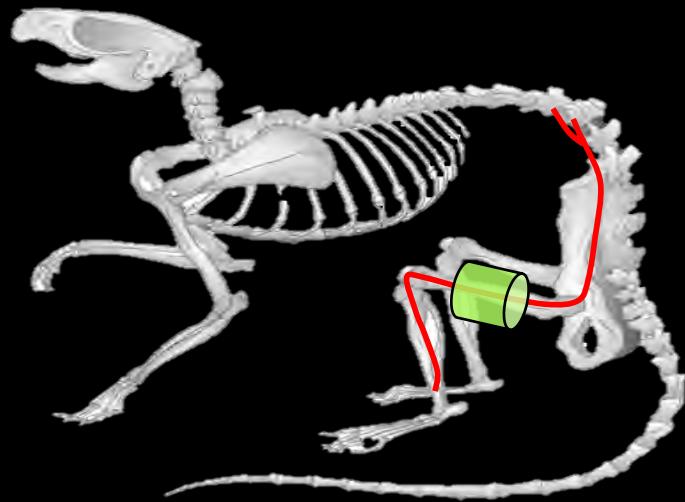
# Immun Gedächtnis?



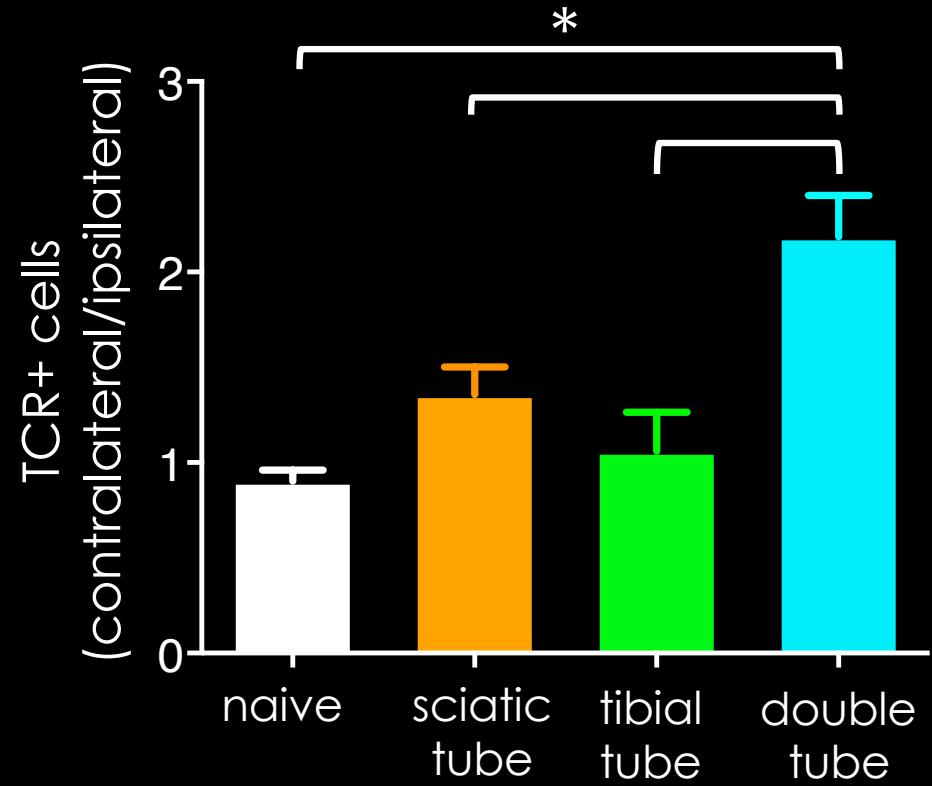
# Immun Gedächtnis?



# Studien Design

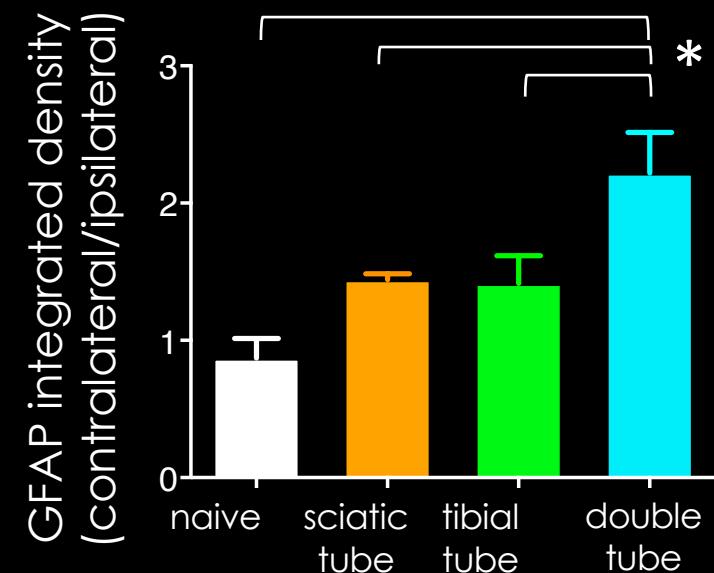
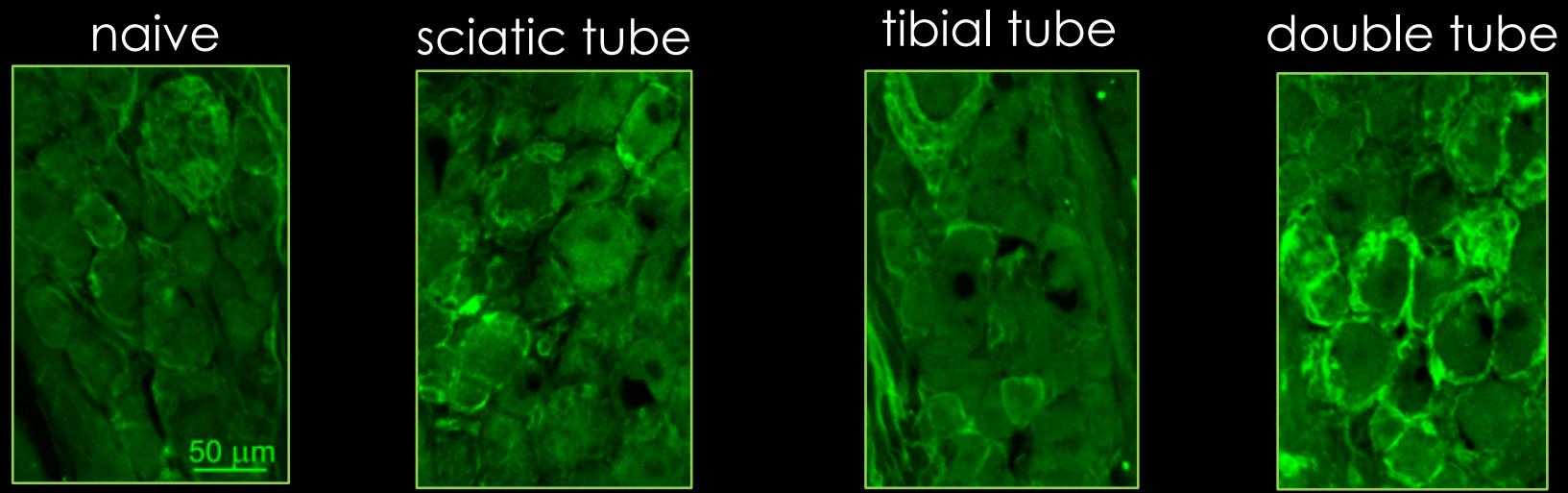


# ↑ T-Zell Aktivierung



Munyanduki et al  
in preparation

# ↑ Satelliten Gliazellen Aktivierung



Munyanduki et al  
in preparation

'Immungedaechtnis' ist ein  
moeglicher Mechanismus der  
das Nervensystem verwundbar  
macht fuer multiple  
Nervenprobleme

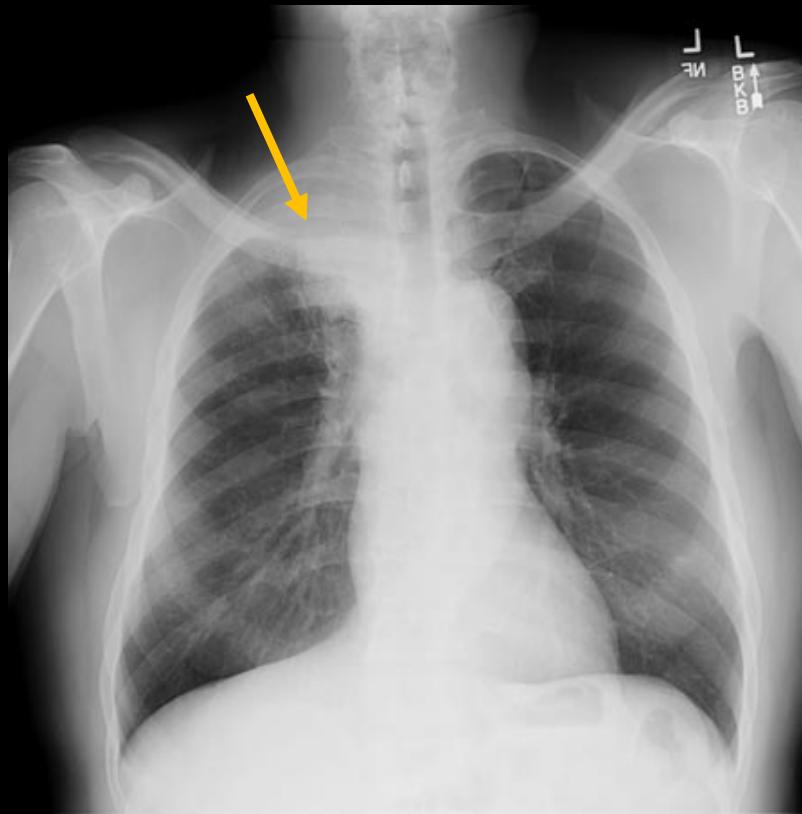
# Management

“Despite many reports on conservative and surgical interventions, .... rigorous scientific investigation of this syndrome and its management is lacking.”

# Beitragende Faktoren

- Ueberkopfaktivitäten (Schwimmer, Speerwerfer)
- Haltung, z. B. hängende Schulter, Schlafposition mit Hyperabduktion (Lee 2011)
- Elevierte 1. Rippe z.B. bei Asthma, flacher oberer BWS
- Tonus der oberflächlichen Halsmuskulatur
- niedriger Blutdruck, Diabetes, Schilddrüsenprobleme, etc

# Aufgepasst: TOS-Masquerade



# Zusammenfassung

- Unspezifisch neurogen > klassisch neurogen
- Neurale Mechanosensitivitaet
- Pathomechanismen spekulativ
- Keine Evidenz fuer Management
- Empirisch: ↓ Druck, ↑ Neurale Resilienz
  - Aufklaerung, Information
  - Funktions- und Haltungsaspekte
  - Muskulaere Techniken
  - Diaphragmal Atmung
  - Neurodynamisches Management

# Danke!

annina.schmid@neuro-research.ch



FONDS NATIONAL SUISSE  
SCHWEIZERISCHER NATIONALFONDS  
FONDO NAZIONALE SVIZZERO  
SWISS NATIONAL SCIENCE FOUNDATION



N H M R C

Australian Government  
National Health and  
Medical Research Council



International Association for the Study of Pain  
**IASP**  
*Working together for pain relief*