Creating a Treatment Plan for your Child (continued)
If you would like Dr. Nath to see your child in person, please call our office to make an appointment or sign up for one of his outreach visits to a city near you at: http://www.drnathelmincs.com

Dr. Nath wants a video of arm movements. 1) Arms at the side 2) Arms in the air 3) Hands behind head 4) Hands to nose 5) Palms upward 6) Hands behind back

Follow-up
Follow-up with Dr. Nath is done through therapist's reports, regular videotape mailings, and in person at his offices in Dubai and Houston. Your local pediatrician may be important for prescriptions and other referrals, but generally can be organized through our office.

For More Information

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Dr. Nath
Dr. Rahul Nath specializes in surgery for patients suffering from nerve injuries, especially for children who have had brachial plexus injury or Erb’s palsy during their delivery.

Dr. Nath has operated on several thousand patients during his 12 years in practice.

Dr. Nath has been named one of “America’s Top Doctors” for 8 years, from 2001 to the present. He graduated from Northwestern University Medical School in Chicago, USA, and has practices in Dubai, UAE and Houston, USA.

Brachial Plexus and Erb’s Palsy Injuries in Children
During the birthing process, babies may have difficult deliveries. This can cause stretching and tearing injuries of the nerves of the arm and hand. These are called “Brachial Plexus Injuries.”

Over the past 12 years of my practice, I have cared for thousands of babies with this type of injury.

I have found that: (1) The nerve injury usually does not need to be repaired; it is most usually a stretch of the brachial plexus nerves. (2) Because the nerves are stretched at a time when the child is growing very fast, some muscles become very tight. (3) When the muscles become too tight, the bones can become twisted, leading to shoulder dislocation.

(1) Nerve Surgery (Nerve Grafting operation)
Although nerve surgery is not required in the majority of cases, if there is not full movement of the arm, shoulder and hand by 3 to 4 months, surgery may be recommended. Only about 5% of children will need nerve surgery.

If nerve surgery is needed, then either scar removal alone or direct repair, such as nerve grafting (see picture below), may be needed.

(2) Muscle Surgery (Mod Quad operation)
Muscle tightness in the armpit and chest area is very common among patients with Erb’s palsy and other brachial plexus injuries. About 50% of children with Erb’s palsy will have this tightness. The muscle tightness causes difficulty in lifting the arm over the shoulder.

The modified quad (Mod Quad) surgery is done from 6 months old to adulthood.

The Mod Quad surgery allows the arm to be raised over the head (see pictures below).

(3) Bone Surgery (Triangle Tilt operation)
When the muscles in the arm become too tight, they can cause the bones of the shoulder to twist during growth. About 40% of children with Erb’s palsy or brachial plexus injury will have bone problems of the shoulder. When the bones become twisted, the arm turns inward, becomes shorter, and the palm of the hand cannot be placed facing upward. Also, the elbow goes high to the side when the hand comes to the mouth. The shoulder can also then become dislocated.

The Triangle Tilt surgery is done from age 6 months to adulthood.

The Triangle Tilt surgery corrects these problems and also corrects the shoulder dislocation (see pictures below).

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Please send a video of your child’s range of movement along with any relevant medical records. Dr. Nath will be able to make a preliminary recommendation based on this information, and his recommendation will be more accurate if the video includes all required movements. He will also be able to tell whether further testing is required, such as a CT of the shoulder bones or EMG of the nerves.