Double-Pacman Flap for a Small Sacral Defect

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A 40-year-old woman presented with a 4 x 4 cm soft tissue defect in the sacral area, which resulted from a skin carbuncle (Panel A). Given her poor self-care, we performed a single-stage reconstruction for the soft tissue defect. After debridement, a double Pacman (bilateral extended V-Y advancement) skin flap with fascia was designed to close the wound (Panel B and Panel C). The post-operative course was uneventful, 6 week later the wound completely healed (Panel D). Several methods have been developed to reconstruct sacral defects. Among them, flap reconstruction has advantages with respect to durability, adequate soft tissue restoration, blood supply, sensation, and cosmesis. The double Pacman flap is an ideal option for small defects. The harvest technique and flap design are straightforward, with easy manipulation and avoidance of tension suture. Notably, there should be minimal debridement of the involved tissue to prevent loss of wound margins and to allow for tension-free closure.

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