



Prognosis

Symptoms may persist for more than a year [14]. Complete recovery is observed in more than 80% of cases at 3 years with a more severe evolution in hereditary forms. The muscle least likely to recover is the anterior serratus (large serratus). The effects depend on the extent of the initial damage. Recent studies report a poorer recovery compared to older studies.

Treatment

The processing is currently not coded [15]. It is purely symptomatic and aims to reduce pain, the consequences of neurological deficits and to improve the prognosis of PTSD.

Pharmacological treatments

In the painful phase and if the patient is seen within the first month, corticotherapy (prednisolone per os 60 mg/day 8 days, then 10 mg/day 8 days) [15] is the treatment of choice; it acts on the pain and allows a better recovery after one year.

The following treatments have been proposed: