



Massimo Rigoni

Nationality: Italian

● WORK EXPERIENCE

31/12/2010 – CURRENT Trento, Italy

ORTHOPAEDIC AND TRAUMA SURGEON AZIENDA PROVINCIALE PER I SERVIZI SANITARI TRENTO

Qualified orthopedic surgeon with 15 years experience in the treatment of trauma patients.

Updated on the latest techniques in upper extremity surgery: arthroplasty, arthroscopy and reconstructive microsurgery.

Hand surgery and damage control orthopedics in polytrauma patients.

Complex upper extremity injuries.

Sports injuries including : elbow, wrist and hand ligament reconstructions, wrist instability using minimally invasive techniques and arthroscopic skills; rotator cuff repair.

31/10/2016 – 29/11/2016 Baltimore, United States

FELLOW AO R ADAMS CROWLEY SHOCK TRAUMA CENTER

31/01/2016 – 27/02/2016 Rochester, United States

VISITING CLINICIAN MAYO CLINIC

08/03/2011 – 30/04/2011

FELLOW AO (AOTRAUMA FELLOWSHIP) HOSPITAL CLINIC BARCELONA (SPAIN)

Operating room; First Aid Service; Outpatients Department

31/05/2005 – 06/01/2011

SENIOR HOUSE OFFICER UNIVERSITY HOSPITAL UDINE; OSPEDALE SANTA MARIA DEL CARMINE ROVERETO (TN)

Operating room; First Aid Service; Outpatients Department

31/03/2009 – 30/04/2009

VISITING CLINICIAN MAYO CLINIC ROCHESTER MN (USA)

28/02/2007 – 31/05/2007

VISITING SURGEON TRAUMA CENTER LORENZ BOEHLER WIEN (AUT)

Operating Room; Outpatients Department

● EDUCATION AND TRAINING

01/05/2024 – 11/09/2024 Trieste, Italy

MASTER IN ORTOPLASTICA: "TRATTAMENTO MULTIDISCIPLINARE DELLE FRATTURE DI GAMBA E PIEDE"

Università degli studi di Trieste

Website <https://apps.units.it/Sitedirectory/InformazioniSpecificheCdS/Default.aspx?cdsid=10658&ordinamento=2022&sede=1&int=web&lingua=15>

Level in EQF EQF level 7

13/11/2020 – 14/11/2020

EUROPEAN DIPLOMA IN HAND SURGERY Federation of European Societies for Surgery of the Hand

Website <https://fessh.com>

21/05/2017 – 23/11/2017 Napoli, Italy

ADVANCED MICROSURGERY TRAINING Centro di Biotecnologie

31/05/2005 – 06/11/2009 Udine, Italy

CONSULTANT IN ORTHOPEDIC E TRAUMATOLOGY SURGERY University of Udine

First Aid Service

Operating Room

Outpatients Department

National classification level in national classification 70/70

30/09/1997 – 25/07/2004 Padova, Italy

BACHELOR Medical School University of Padua

National classification 97/110

30/09/2001 – 30/06/2002 Prague, Czechia

5TH YEARS OF MEDICAL SCHOOL Medical School Charles University Prague

National classification Excellent

● **LANGUAGE SKILLS**

Mother tongue(s): **ITALIAN**

Other language(s):

	UNDERSTANDING		SPEAKING		WRITING
	Listening	Reading	Spoken production	Spoken interaction	
ENGLISH	B2	B2	B2	B2	B2
GERMAN	A2	A2	A2	A2	A2
SPANISH	B1	B1	B1	B1	A2

Levels: A1 and A2: Basic user; B1 and B2: Independent user; C1 and C2: Proficient user

● **PUBLICATIONS**

2021

A new "denervation" technique for painful arthritic wrist

Wrist denervation is, by the way, one of the most performed and long lasting surgical technique for wrist arthritis. Despite many progress in upper extremity joint arthroplasty, wrist arthritis remain difficult to treat specially in young patients and heavy manual workers.

Aim of this technical article is to describe a new outpatient's procedure which applying pulsed radiofrequency on nerve structure of the wrist could achieve similar clinical results of a wrist denervation without surgical incision.

J Wrist Surg

2020

[In Vitro and In Vivo Bioreactor Strategies for Bone Defect Repair](#)

The key elements for bioartificial bone formation in three-dimensional matrices in tissue engineering concept are a high number of osteogenic cells and supplies of oxygen and nutrition [1]. In the treatment of large bone defect, tissue engineering is challenging the problem to obtain scaffolds able to release growth and differentiation factors for mesenchymal stem cells, osteoblasts and endothelial cells in order to achieve faster mineralization and activate a stable vascularization. Bone is a highly vascular structure: like all other living tissues, it is supplied by several blood vessels; on the contrary cartilage is avascular, a lymphatic and has the lowest cellular density of any tissue in the body with less than 5% cells by volume. Despite important progress in engineered scaffolds for cartilage lesions, bone tissue scaffolds are still facing diffusion issues, specially a lack of functional network of blood vessels. Three-dimensional scaffolds used in bone tissue engineering, increase the complexity of the culture because of the difficulty in supplying oxygen and nutrients to the cells. Researchers are developing in vitro and in vivo bioreactor based strategies for solving these functional problems. The concept of bioreactor for growing "functional engineered

tissues" has not only an in vitro application but can be extended to an in vivo approach. The aim of this mini review is to analyze current trends in applying the concept of bioreactor to bone tissue engineering, comparing in vivo and in vitro methods currently proposed for future critical size skeletal defect repair in reconstructive surgery

Biomed J Sci & Tech Res 24 (4) 2020

2019

Avulsion fracture of extensor radialis brevis insertion: case report and literature review

Bases of the index and long finger metacarpals have remarkable stability which is provided by the strong capsulo-ligamentous attachments and the unique bony architecture, for these reasons injuries to that metacarpal bases are unusual and rarely reported in medical literature. In the present article, we report an avulsion fracture of the III metacarpal base, initially underestimated, treated with open reduction and internal fixation with anatomic repair of the extensor radialis brevis. Furthermore, with the aim of highlighting clinical and radiological evaluation given the rare nature of these injuries, a review of the literature is presented.

Chirurgia della Mano - Vol. 56 (2) 2019

2018

Rock climber's hand: pulley lesion diagnosis, treatment and functional result. Acute avulsion of volar plate during climbing: a case report

Climbing is a competitive and recreational sport activity that involves an increasing number of young people, especially in the author's hospital area.

Several disciplines of the sport exist, including traditional climbing, sport climbing and bouldering. Sport climbing and bouldering, the newest disciplines, can be performed on artificial surfaces as well as on natural rock during all season of the year.

During climbing flexor tendon apparatus is exposed to high forces, these forces can cause a wide spectrum of injuries from sprain to complete lesion of more than one pulley. These different lesions are frequent and well known to climbers but just a few needs to be fixed surgically. Aim of our case report is to describe a complete avulsion of palmar plate during climbing. This will be the starting point to examine in depth the mechanism of injury and evaluate some useful diagnostic tools for selecting patients whose flexor tendon apparatus needs surgical attention.

Finally, functional impairment of joint, tendon and palmar fascia in rock climber's hand after many years of practice will be taken into account.

Keywords: pulley rupture, volar plate avulsion, sport climbing, rock climber's hand, flexor tendon.

Chirurgia della Mano - Vol. 55 (2) 2018

● **CONFERENCES AND SEMINARS**

Conferences

Distal Radius Fracture: lunate facet osteosynthesis Free Paper. Riunione Superspecialistica AO Trauma Italy November 2014

Livelli d'amputazione e tecniche chirurgiche nell'arto inferiore Free Paper (Aggiornamento multidisciplinare: dall'amputazione alla riabilitazione di arto inferiore) Trento March 2012

Distal radius fracture Free Paper (Lezione presso la scuola di specializzazione di ortopedia e traumatologia dell'Università di Udine) February 2010

Genetic and environmental factor linked to osteoporosis Free paper (Advances in diagnosis and treatment of multifactor genetic diseases) 26 September 2008

Patologie del piede Free Paper Corso F.I.G.C di traumatologia dello sport nel calcio. Rovereto (TN) February 2007

Tendinopatie Free Paper Corso F.I.G.C di traumatologia dello sport nel calcio. Rovereto (TN) February 2007

Periprosthetic fracture: treatment with cable ready plate Free paper. 133° Riunione S.E.R.T.O.T Trento 19-20 May 2006

● **MEMBERSHIP**

Membership

Member of the AOTrauma since 2011

Member of Italian Society for Hand surgery since 2014

Member of Italian Society for Shoulder and Elbow surgery since 2015