Conclusion: A high index of suspicion is required and patients should be counselled about such complications should perforation and gallstone spillage be encountered intra-operatively.

1001: HUMAN BITE TO THE EAR: EXPLORING ITS RECONSTRUCTION
Sarus Jain, University of Liverpool, Liverpool, UK.
Aim: The incidence of human bites in the Merseyside region is amongst the highest in the United Kingdom. Our aim was to explore reconstructive options of human bite to the ear as successful reconstruction can be notoriously difficult to achieve. We also explore the transmission of diseases through human bite that can make surgery challenging due to infection.
Method: A search of ‘Medline’ and ‘EMBASE’ was conducted in addition to a hand search of key journals. We also present the case of a 26-year-old gentleman who underwent fascial flap reconstruction after superior helix avulsion.
Results: A number of reconstructive options have been described in the literature including composite grafts, flaps and two-stage techniques. These reconstructive procedures can be suitably employed to reconstruct a variety of traumatic ear injuries according to site and injury mechanism. In addition to this, we found the use of medicinal leeches in providing excellent aesthetic appearance post-operatively.
Conclusion: Human bites are an increasingly common presentation that healthcare professionals should be aware of. The ear in particular is a notoriously difficult structure to reconstruct but yields positive psychological benefits. Continual advances in autologous reconstruction and tissue engineering will further both reconstructive options and patient quality of life.

1074: IJS CASE REPORT 1ST PRIZE: ACUTE BUDD CHIARI DUE TO A SIMPLER LIVER CYST – GOOD CYST GONE BAD?
Jennifer Long, Hannah Vaughan-Williams, Joshua Moorhouse, Harsheet Sethi, Nagappan Kumar, University Hospital Wales, Cardiff, UK.
Background: Simple liver cysts are common, rarely causing significant morbidity or mortality. Budd Chiari syndrome (BCS), caused by obstruction of hepatic venous outflow, is the leading cause of post-sinusoidal liver failure. We present a rare case of BCS caused by a simple hepatic cyst.
Patient: A 16x16cm liver cyst was found on computed tomography of a 66 year old woman presenting with abdominal pain. Cyst exerted mass effect with almost complete compression of the IVC. Shortly after admission patient developed acute liver failure, with deranged clotting and hepatic encephalopathy requiring full organ support on the intensive care unit. Cardiac output studies showed cardiac index of 1.4 (normal 2.5-4.0 L/min/m²).
Results: An emergency laparotomy with fenestration of cyst and drainage of two litres of purulent material lead to full recovery. Intra-operative cystic fluid aspirates later confirmed no evidence of echinococcus. Histology confirmed a simple cyst. Liver biopsies showed severe, confluent, bridging necrosis, without background parenchymal liver disease.
Conclusions: Acute BCS due to rapid compression of all major hepatic veins leading to fulminant hepatic failure is rare. Our case highlights a rare but clinically significant complication of a simple liver cyst that clinicians should be aware of when managing these “innocent” lesions.

1294: A MODIFIED MLADICK APPROACH FOR EAR REIMPLANTATION FOLLOWING MINOR TRAUMATIC HELICAL AMPUTATION
Elizabeth Litt, Nicola Blucher, Sandip Hindocha, Alder Hey Childrens Hospital, Liverpool, UK.
Aim: Traumatic ear amputation is a rare occurrence. It may entail serious aesthetic deformity therefore if feasible, ear reimplantation should be attempted. Mladick’s retroauricular pocket principle aims to enhance survival of the reimplanted ear segment. We describe a case report of a 3 year old boy with a small traumatic amputation of the upper outer helix sustained after falling onto a glass vase. We performed ear reimplantation using a modified Mladick approach. The literature surrounding ear reimplantation techniques is also discussed.
Method: A two staged modified Mladick approach was used to reimplant the amputated ear segment. The anterior aspect of the ear segment was directly reattached to the auricle, and the posterior aspect was attached to the pariauricular incision for aided perfusion. Two weeks later the remaining segment was completely reattached.
Results: The reimplanted ear segment survived with a good cosmetic outcome.
Conclusions: There is debate in the literature that repairs with periauricular tissue flaps provide inconsistent outcomes, and delayed re-implantation with costal cartilage results in a better aesthetic outcome. However in cases where the ear segment amputated is minimal such as ours, direct reimplantation with a modified Mladick technique may prove more appropriate.

1309: A RARE BONE TUMOUR IDENTIFIED WITH A POSITIVE PREGNANCY TEST
Ben Marson, Karen Bradshaw, Prakash Kanse, Withybush General Hospital, Haverfordwest, UK.
Background: Pregnancy testing is a mandatory preoperative investigation for women undergoing elective operations in our hospital. A positive pregnancy test often has a gynaecological basis, though in the post-menopausal woman a diagnosis may require extensive investigation. Only rarely will an orthopaedic basis of the raised β-HCG be identified
Method: We present the case of a 53 year old woman who attended the same day admission unit for an elective L5/S1 disecotomy. Her preoperative pregnancy test was positive.
Results: The positive pregnancy test was investigated and no uterine or ovarian cause was found. A multi-loculated bone lesion on the left neck of femur was identified on the pelvis MRI. This was compared to a plain pelvic radiograph which demonstrated multi cystic encapsulated sclerotic bone. A diagnosis of liposclerosing fibromyxoid tumour was made at biopsy.
Conclusions: We have presented a rare tumour of the femoral neck diagnosed, in part, with a positive pregnancy test. There are fewer than 150 cases reported in the literature, with no cases reported from the United Kingdom. No previous association has been reported with these tumours and positive pregnancy tests, but germ cell tumours do make up part of the differential diagnosis of a raised β-HCG.

1328: THE RADIOLOGICAL FINDINGS OF UPPER LIMB SKELETAL DEFORMITIES AND FUNCTIONAL OUTCOMES IN THREE GENERATIONS OF HOLT-ORAM SYNDROME
Samuel George, Muhammad Javed, Thomas Wright, Max Murison, Welsh Center for Burns and Plastic Surgery, Morriston, Swansea, UK.
Introduction: The Holt-Oram Syndrome is a congenital condition characterized by abnormalities of the upper limb skeleton and the heart. Frequently these patients require a surgical intervention due to skeletal abnormalities to improve functional outcome. We describe a case series of a family involving three generations in relation to their skeletal deformities, radiological findings and functional outcome.
Method: Retrospectively, a comparison of the radiological findings and postoperative functional outcome is made following the surgical interventions.
Result: The grandmother had bilateral absent thumbs and did not undergo any surgical correction. The mother had absent thumb, short radius with radio-ulnar synostosis, left carpal bone fusion and syn-dactyly of right thumb which was released. The daughter had bilateral synostosis of radius and ulna and underwent excision of the hypo-plastic left & duplicate right thumb with pollicization of the left index finger.
Conclusion: Surgical intervention provided good functional outcome in the mother and the daughter. The Holt Oram Syndrome can involve complex skeletal defects with variable functional implications. Each patient has to be individually assessed with a thorough radiological work up to achieve best surgical and functional outcome.

1382: A CURIOUS CASE OF OSTEONECROSIS OF THE JAWS
Elizabeth Gruber, Grant Isherwood, Grigore Mihalache, Andrew MacBean, Royal Shrewsbury Hospital, Shrewsbury, UK.
Background: Osteonecrosis can be defined as exposed bone in the mandible, maxilla or both that persists for at least 8 weeks, in the absence of previous radiation or metastases in the jaws.