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THR POST ACETABULAR ORIF FAILURE

PRESENTER: DR. CHOMBA DORCAS



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BIODATA

” NAME: J.M.N

” AGE: 29yrs

” SEX: MALE

” OCC: Driver

HPI

- ” involved in a road traffic accident,
- ” sustained injuries to the hip, more specifically the acetabulum.
- ” Acetabular ORIF done
- ” patients discharged.
- ” On follow up both patients had pain at the hip,
- ” inability to bear weight and progressive shortening of the limb
- ” with limited ROM at the affected hip

EXAMINATION FINDINGS

- “ Antalgic gait
- “ Shortening of the lower limb
- “ Reduced ROM hip
- “ Distal pulses present
- “ Neurological function distally intact



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PRE-OP XRAYS



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INTRA-OP

” Position

” Approach

” Findings

” Procedure –

POST-OP







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BIODATA

” NAME: A. G

AGE: 28yrs

SEX: Male

OCUUPATION: Motorcycle rider

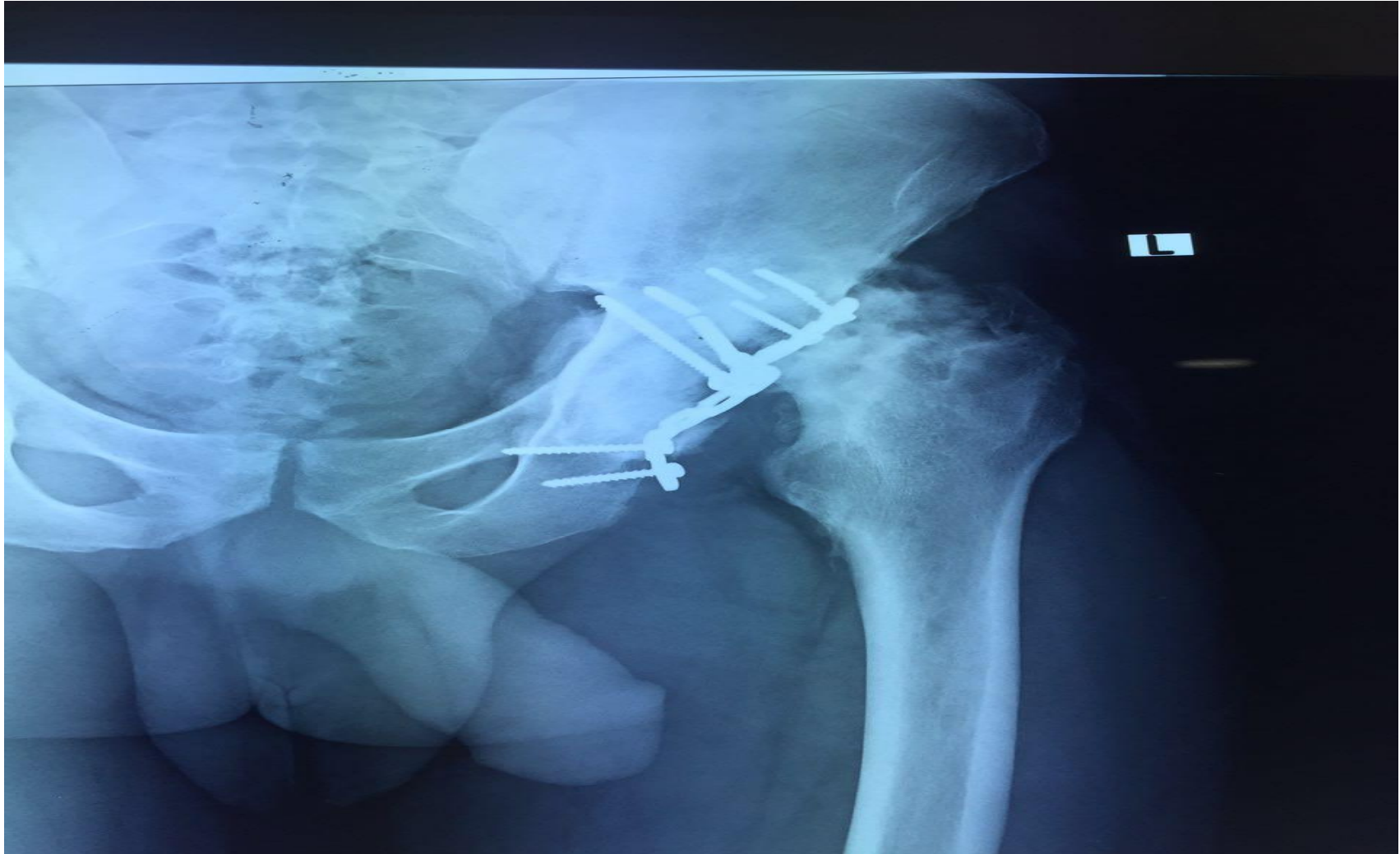
HPI

- ” involved in a road traffic accident,
- ” sustained injuries to the hip, more specifically the acetabulum.
- ” Acetabular ORIF done and patients discharged.
- ” On follow up both patients had pain at the hip,
- ” inability to bear weight and
- ” progressive shortening of the limb
- ” with limited ROM at the affected hip.

EXAMINATION FINDINGS

- “ Ambulating with crutches
- “ Shortening of the lower limb
- “ Reduced ROM hip
- “ Distal pulses present
- “ Foot drop, unable to flex/ext ankle and big toe

PRE-OP XRAYS





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INTRA-OP

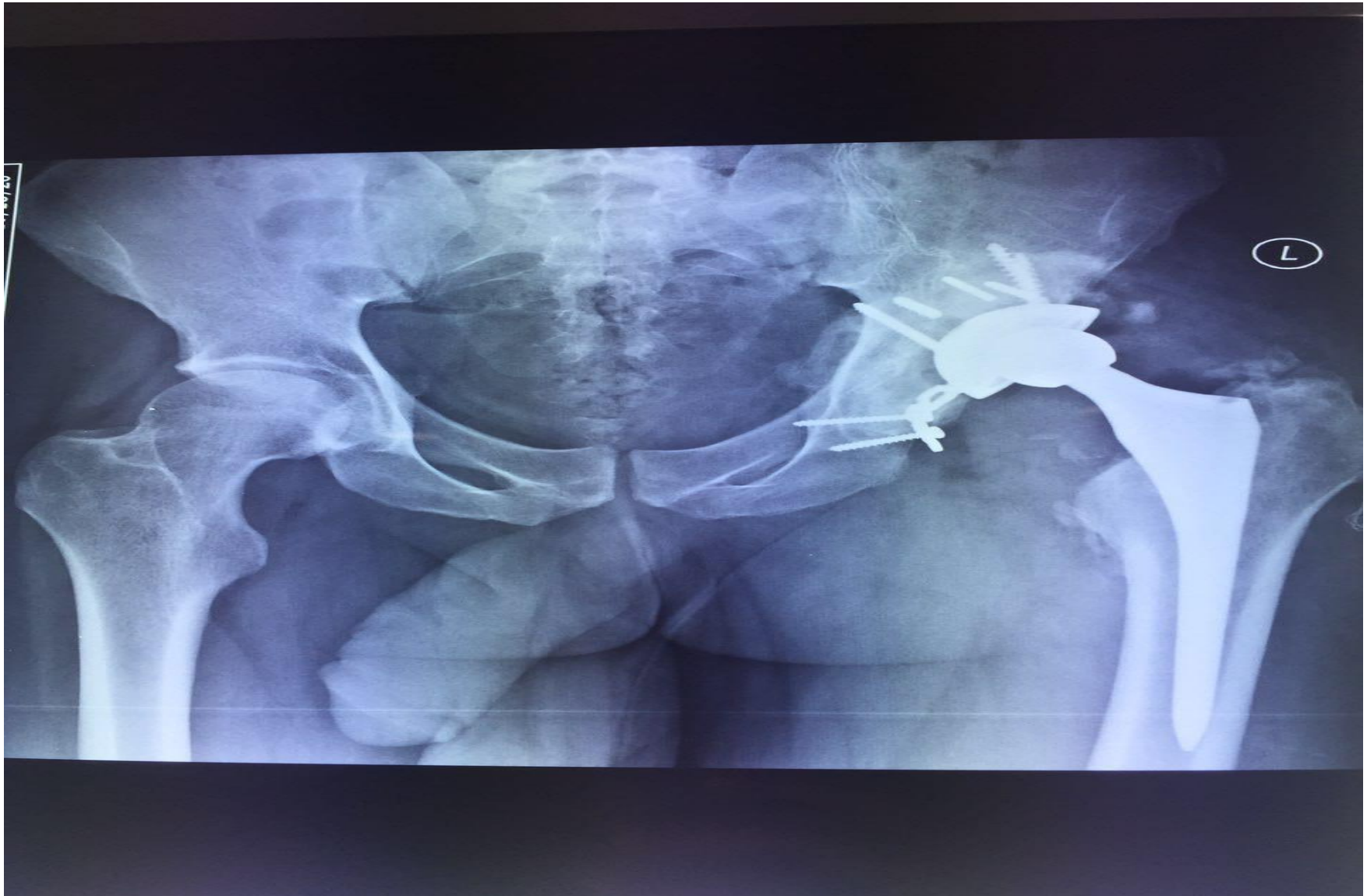
” Position

” Approach

” Findings

” Procedure

POST OP



DISCUSSION

- “ Incidence of acetabular fractures:
- “ Only 10% of the pelvic disruptions involve the acetabulum.
- “ Posterior wall fractures are most common, comprising 24% of acetabular fractures.
- “ The primary cause in younger individuals is high-energy trauma (>35yrs)
- “ Local data: The most frequent pelvic fractures were the fractures of ischiopubic rami, (51.3%) followed by acetabulum fractures, (33.9%).
- “ The incidence of pelvic and acetabular fractures in the UK is 3/100,000 with about half of the patients requiring operative treatment . Extrapolated, at least 1200 such cases in Kenya with 600 needing operative treatment annually.

THIRTY POST ACETABULAR ORIF

” Risk factors

- ” 1. Posterosuperior wall fracture
- ” 2. Posterior wall and column fracture
- ” 3. Trochanteric osteotomy
- ” 4. **Nonanatomic reduction**
- ” 5. Severe primary displacement of fragments
- ” 6. **Delayed surgical fixation of acetabulum fracture**
- ” 7. Comminuted fractures with several particles
- ” 8. Intraarticular placement of screws
- ” 9. **AVN**
- ” 10. Head of femur(pipkin) fractures (missed/iatrogenic)