

STABILIZATION OF UNSTABLE PELVIC INJURY IN A MORBIDLY OBESE PATIENT USING INFIX : A CASE REPORT

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Introduction: Open pelvic fractures make up 2–5% of all pelvic ring injuries. Their mortality has been reported to be as high as 50%. Traditionally, unstable pelvic injury are treated with external fixation or plating. However, these methods are usually associated with various type of complication such as pin site infection and wound breakdown in the case of obese patient. A relatively new method had become an option for the treatment for unstable pelvic injury, Pelvic anterior cutaneous internal fixators (INFIX). Here we report a case of an unstable pelvic injury in an obese patient who was treated with minimal invasive technique by using INFIX

Discussion: A 36 years old obese male who was involved in a road traffic accident. He sustained an open book fracture, anterior posterior compression type ii. CT pelvic also showed Comminuted fracture of the right sacral ala, extending to the right sacral foramen as well as the right sacroiliac joint and Left iliac wing fracture extending to the left ischium and left superior pubic ramus. He was hemodynamically unstable on presentation and massive transfusion protocol was activated. He also sustained an intrabdominal injury, underwent exploratory laparotomy twice. The open book fracture was temporarily immobilized by pelvic binder. We managed to stabilize the open book pelvic injury by screw fixation of left sacroiliac joint and bilateral iliac pedicle screw with rod on day 4 post trauma. The duration of operation was around 1 hour with minimal blood loss. The patient was allowed weight bear immediately. The INFIX was removed 1 year after the accident. There was no complication during the recovering process

Conclusion: Modern subcutaneous internal fixators had shown satisfactory outcomes to the patient. It was minimally invasive and time effective, thus was able to reduce the mortality rate as unstable pelvic injury had high mortality rate.