

CLOSE INTERTHROCANTERIC FRACTURE OF FEMUR IN PAEDIATRIC AGE GROUP TREATED WITH CONTRALATERAL PROXIMAL HUMERAL INTERNAL LOCKING SYSTEM (PHILOS): A CASE REPORT

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Introduction: Proximal fracture of femur in paediatric age group most commonly caused by high energy trauma, which usually accompanied with polyfracture. Given the small size of paediatric bone, the common fixation modalities such as proximal femoral nail, proximal femoral locking plate and dynamic hip screw unfavourable.

Discussion: A 12 years old boy, ADL independent weight of 38kg with underlying Angelman syndrome, epilepsy with global developmental delay and intellectual disability presented with an episode of generalized tonic clonic seizures. On x ray of left hip found a fracture left intertrochanteric of left femur. According to Pierre Delbet, this fracture classified as Delbet Classification type 4, which given that patient age more than 4 years old, indicated for open reduction and internal fixation. There was no paediatric size dynamic hip screw available for this patient. Thus the operative intervention planned for this patient was adult proximal femur locking plate keep in view plating using contralateral PHILOS. Patient was put on the traction table and reduced using closed method. Lateral approach used and proximal femur visualized. Proximal femur locking plate measured as shown in figure 2, showing that the screw 4.5 will cut off the anterior and posterior cortex as well. Thus the decision made to use contralateral PHILOS plating on left femur.

Conclusion: In the event of dire need, the PHILOS plate is a suitable substitute in view of limited options of available implants in our country for proximal femoral fractures in pediatric patients.