

## **RAYTEX GAUZE FOR CONFIRMATION OF FEMUR HEAD POSITION IN DIFFICULT OPEN REDUCTION OF IMMATURE HIP DISLOCATION.**

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**Introduction:** Delayed or missed diagnosis of septic arthritis of hip in pediatrics may complicated with chronic hip dislocation. There are varies interventions for chronic hip dislocations included open reduction, supplementary femoral procedures, and acetabular procedures. Sometime soft tissue obstacles that may prevent concentric reduction of a dislocated hip.

**Discussion:** A 9 years old girl had right hip septic arthritis, complicated with right hip dislocation. She was planned for open reduction, femoral shortening derotational osteotomy and acetabuloplasty of right hip. Intraoperatively there was difficulty in assessment of stability of the right hip. Decided to put Raytex gauze over the acetabulum to identify distance of femoral head and medial wall of acetabulum. Confirmed with imaging, medial joint line widening due to soft tissue over medial wall of acetabulum. Thus, further debridement of soft tissue is done and hip able to reduced. Reduction accepted in hip external rotation.

**Conclusion:** Cartilage depth of acetabulum and concentric of reduction of femoral head in chronic hip dislocation unable to be identified due to soft tissue thickening. Thus, by using Raytex gauze helps in determining distance of femoral head and medial wall of acetabulum in the procedure of open reduction of hip dislocation.