

I still can walk! A case report of Proximal Focal Femoral Deficiency

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INTRODUCTION:

Proximal femoral focal deficiency (PFFD), is a rare congenital anomaly resulting from failure in the development of proximal femur and hip joint. The disease can vary in the clinical presentation and degree of deficiency. Definitive treatment of this anomaly is challenging, complex, multi-disciplinary, and difficult to carry out with limited resources. We report the short-term management in PFFD.

REPORT:

A seven years old boy presented with an obvious leg length inequality with his left foot situated just distal to his right knee (Figure 1). The patient mother's request was to enable her son to attain his goal of walking 'normally' with financial constrain. He ambulated independently with bilateral axillary crutches, non-weight-bearing through his left leg. He demonstrated the ability to fully weight bear through his affected left leg by walking without crutches utilizing right knee flexion to allow his left foot to contact the ground but infrequently ambulates in this manner. Upon examination, a short bulky left thigh that is flexed, abducted, and externally rotated is observed (Figure 1). There was no tenderness, or sensory deficits were noted on either leg. Leg length assessment showed, left leg was 33% shorter than the right with an adequate range of motion.

Figure 1: Attitude of left lower limb and pelvic x-ray



CONCLUSION:

To reduce leg length discrepancy, we deduce a method by using solid ankle-foot orthosis (AFO) combined with ICRC polypropylene prosthetic materials and a solid ankle cushion heel foot (Figure 2). Rehabilitation and physiotherapy were commenced subsequently to increase weight-bearing through the prosthesis and perform functional and gait training. In managing PFFD, collaboration among a team can yield ground-breaking results and is not limited to the lack of resources in the secondary health center.

Figure 2: Patient fitted with the prosthesis



REFERENCES:

1. Devens MF. Treatment of proximal femoral focal deficiency by using a hybrid orthotic and prosthetic design. *J Prosthet Orthot* 1999; 11: 29–32.