

ILIAC BONE FRACTURE : PLATING OR CANNULATED SCREW OR BOTH

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INTRODUCTION:

Neither plating nor lag screw fixation of a displaced iliac wing fracture as part of an unstable pelvic ring disruption has been studied biomechanically. Various combinations of these fixation implants were evaluated for an unstable iliac fracture.

REPORT:

A 28 years old male, alleged motor vehicle accident and complain of pain of bilateral hip & left waist. On examination, tenderness & reduced range of motion of bilateral hip. Distal pulses palpable and good circulation. Plain radiograph showed fracture of right acetabulum & left iliac wing.

The patient was placed in supine position with appropriate paddings support, under general anesthesia. Bilateral ankle was hanged at the edge of table, for easy access to an image intensifier. Pelvic region was cleaned & draped. An anterior approach of iliac wing, with skin incision along the iliac crest. Fracture site reduced & hold with pointed reduction clamp & k-wires. Recon plate & cannulated screw was inserted. The reduction was confirmed with intraoperative image intensifier.

Patient was strictly on non-weight bearing wheelchair. Patient was referred to physiotherapy for bilateral hip range of motion.



Figure 1: Pre-operative radiograph

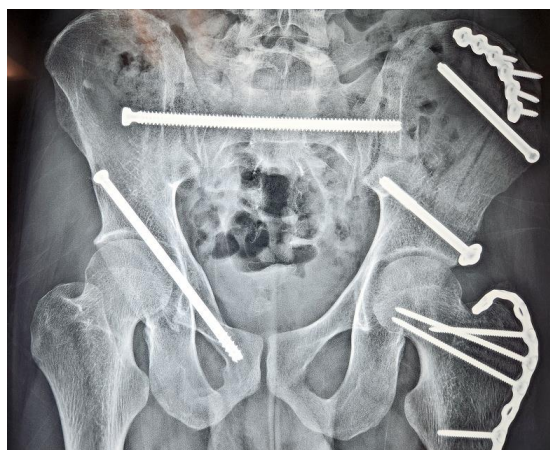


Figure 2: Post-operative radiograph

CONCLUSION:

There has been great controversy about management of iliac wing fracture. This technique can restrict damage to the surrounding soft tissues, decrease complications, and promote good clinical results.