

Ipsilateral Neck of Femur Fracture with Posterior Hip Dislocation and Acetabular Wall Fracture: A Case Report

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INTRODUCTION:

Ipsilateral neck of femur fracture with hip dislocation is rare and about less than 40 cases were reported in the past varying their presentation, management and outcomes (Tannast et al., 2009; El Masry, 2017).

REPORT:

This is a case of previously well 53 years old male who had involved in motor vehicle accident and sustained injury to his left hip.

Primary survey found out he had intraabdominal injury which eventually treated conservatively. Apart from that, he sustained ipsilateral displaced left neck of femur fracture with posterior hip dislocation and comminuted acetabular wall fracture. Clinically, neurovascular status of the limbs was intact with the apparent shortening and externally rotated lower limb.

With serial investigations and thorough discussions, he underwent operation screw fixation neck of left femur and plating of left acetabulum one week after injury. The acetabular plating was approached posteriorly and cannulated screw fixation of the femoral neck done.

At 2 months post operation, there was no symptoms and signs of avascular necrosis of the femoral head or secondary osteoarthritis. However, after 4 months of operation, there was collapsing of neck of femur and coxa vara with implant failure.



Figure 1: Pelvis X-ray on initial injury

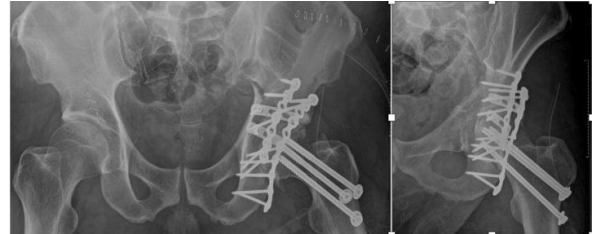


Figure 2: Pelvis X-ray post operation

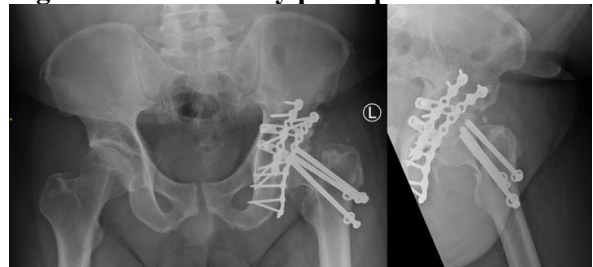


Figure 3: Pelvis X-ray 4 months post operation

CONCLUSION:

Neck of femur fracture with dislocation is an orthopaedic emergency, but in this case the intrabdominal injury delayed the procedure which further increased the risk of the complications.

REFERENCES:

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2. Tannast, M., Mack, P. W., Klaeser, B. & Siebenrock, K. A. (2009) Hip dislocation and femoral neck fracture: Decision-making for head preservation. *Injury*, **40**(10), 1118–1124.