

A Complicated Case Of Segmented Tibia Fracture And Its Surgical Dilemma

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INTRODUCTION:

Tibia fractures are common injuries, often requiring surgical intervention. Fractures of the proximal tibia can be challenging to manage, and when combined with a distal tibia fracture, the management becomes more complex.

REPORT:

A 16 year old male who presented to emergency department for pain and swelling over right leg after a motor vehicle accident. Imaging revealed a displaced fracture of the proximal third tibia with a concomitant distal tibia fibula fracture. The patient was scheduled for surgical intervention, and a pre-operative plan was made for the plating of the proximal and distal tibia and fibula fracture.

The patient was placed on a non-weight-bearing status for 6 weeks, following which he was allowed partial weight-bearing with the aid of crutches. Patient is still under follow up in our centre and is expected to have full recovery without limitation of movements.

Most literature shows that an ipsilateral ankle fracture (lateral, medial, or posterior malleolus) can be expected in association with a tibial shaft fracture in from 1% to 25% of patients, with such pairings more common with spiral tibial shaft fractures(1). Fractures of the middle or distal third of the diaphysis have a higher rate of distal tibial fractures in patients with oblique or spiral primary tibial shaft patterns(2). Distal tibia fractures may be treated successfully with plates or nails. However delayed union, malunion, and secondary procedures were more frequent after nailing.(3)

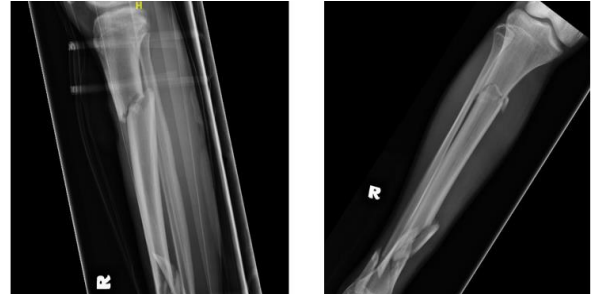


Figure 1: pre op xray



Figure 2: post op xray

CONCLUSION:

Plating for fracture ipsilateral proximal and distal tibia can be an effective treatment option for patients with this type of injury.

REFERENCES:

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