

WHY IS IT PAINLESS?

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INTRODUCTION:

Avascular Necrosis (AVN) of the femoral head is a dreaded complication of hip trauma, especially in cases of dislocations. This is due to the disruption of blood supply to the proximal femur¹. The Ficat and Arlet classification is used with recent modifications by Steinberg which uses clinical and radiographical changes. We present a unique case of asymptomatic AVN femoral head.

REPORT:

14 years old boy was involved in motor vehicle accident (MVA) and sustained closed right hip posterior dislocation with acetabular wall fracture and ipsilateral midshaft femur fracture. A Computed Tomography (CT) hip done showed involvement of posterior column. Initial reduction attempts in emergency department were unsuccessful. He underwent immediate open reduction, plating of the right acetabulum and plating of right femur. Postoperatively he was kept non weight bearing for 3 months and subsequently allowed full weight bearing. Follow up x-rays at 5 months post operatively showed signs of avascular necrosis of the femoral head (FICAT 3) with presence of crescent sign, however patient was completely asymptomatic. He was able to perform daily activities and hip range of motion (ROM) was full. Since he had an implant in his hip and femur, decision to proceed with a magnetic resonance imaging (MRI) was withheld for now. Other fractures had united.



Figure 1: Post operative x-ray



Figure 2: Post operative 5 months

CONCLUSION:

Although femoral head AVN usually presents with an initial complaint of painful hip ROM, there may still be rare occurrences such as in our case. He has been started on bisphosphonates². The question remains as to whether any intervention is necessary at this point of time and also whether will he require any form of surgical intervention in the future. Further close monitoring with serial x-rays are required and if any symptoms arise, necessary action will be taken.

REFERENCES:

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