

SURGICAL MESH APPLICATION IN UNSTABLE HIP DISLOCATION

¹Thaneshwara Rao A; ¹Hadizie D; ¹Nur Sabrina AG; ¹Mohammad Aizat MS; ¹Wan Faisham WI

¹Orthopaedic, Universiti Sains Malaysia, Kubang Kerian, Malaysia.

INTRODUCTION:

Hip dislocation requires immediate medical attention. Neglected hip dislocations can result in long-term consequences, including chronic pain, arthritis and disability. We present a case of neglected traumatic left hip dislocation that was treated with open reduction and reinforcement with a surgical mesh.

REPORT:

A 16-years-old boy was referred to our center for persistent left hip pain and disability for 3 months following an MVA. Upon examination, there was a fixed flexion deformity of the left hip joint. Left lower limb was shortened, adducted and internally rotated. Plain radiographs of the pelvis and left hip revealed a posterior left hip dislocation with evidence of posterior acetabular wall fracture. CT scan confirmed the diagnosis of neglected posterior left hip dislocation with posterior acetabular wall fracture (Figure 1).



Figure 1: CT 3D recon showing posterior hip dislocation with acetabular wall fracture.

Patient initially planned for open reduction and posterior acetabular wall plating. However intraoperatively a large defect was noted at the severely comminuted posterior acetabular wall causing instability.

Thus, intraoperative decision was made to place a mesh instead of plate to reinforce the posterior acetabular wall (Figure 2). Post mesh placement, hip joint was stable.

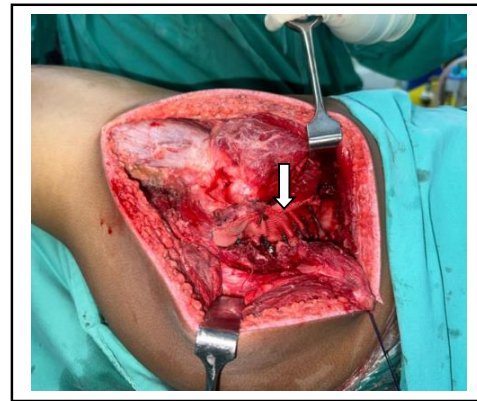


Figure 2: Intra operative picture with mesh insitu.

Postoperatively, the patient was kept non-weight bearing for six weeks. Subsequent clinic visits revealed a well reduced hip joint with good mobility. He was started on a physiotherapy program to improve the range of motion of the hip joint.

CONCLUSION:

Neglected hip dislocations are rare and they can result in long-term complications. The acetabular wall fracture is a common complication of hip dislocation, and it can result in a significant defect. Reinforcement with mesh can help to provide stability to the joint and prevent further complications.

REFERENCES:

Koval KJ, Zuckerman JD. Hip dislocations. In: Rockwood CA, Green DP, Bucholz RW, Heckman JD, editors. Rockwood and Green's fractures in adults. 6th ed. Philadelphia: Lippincott Williams & Wilkins; 2006. p. 1673-1706.