TIBIAL SHAFT FRACTURES

PROXIMAL, DISTAL, SEGMENTAL

AO TRAUMA COURSE – ADVANCED PRINCIPLES OF FRACTURE MANAGEMENT

COPENHAGEN 22-26/4-2018

CARL ERIK ALM



LEARNING OUTCOMES



NOT

EPIDEMIOLOGY

CLASSIFICATION

SIMPLE SHAFT FRACTURES

COMPLEX TIBIAL FRACTURES - CHARACTERISTICS

HIGH ENERGY

OFTEN POLY TRAUMATIZED PATIENTS

SEVERE SOFT TISSUE INJURIES





INITIAL EVALUATION





DEFINITIVE VS TEMPORARY FIXATION





COMPLEX TIBIAL FRACTURES

PLAN YOUR OPERATION...

- PLATE/NAIL/CIRCULAR FRAME
- POSITIONING, IMAGING,
 APPROACH, REDUCTION TOOLS

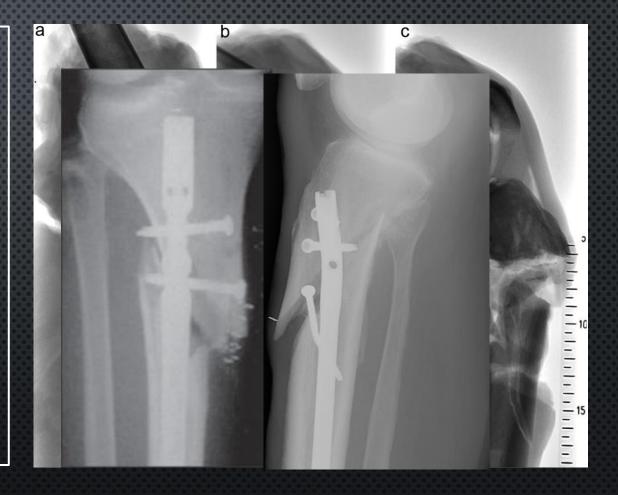
...AND OPERATE YOUR PLAN!





PROXIMAL FRACTURES

- TECHNICALLY DEMANDING
- DEFORMING FORCES
 - PROCURVATUM
 - VALGUS
- BONY ANATOMY OF PROXIMAL TIBIA



Franke et al. Injury 2016

PROXIMAL FRACTURES – TREATMENT OPTIONS







- Bhandari et al. JOT 2003. Review.
 - Malunion: IMN > Plate > Frame
 - Infection: Plate > Frame > IMN

- Lindvall et al. JOT 2009 IMN vs MIPPO
 - Malunion: IMN > Plate

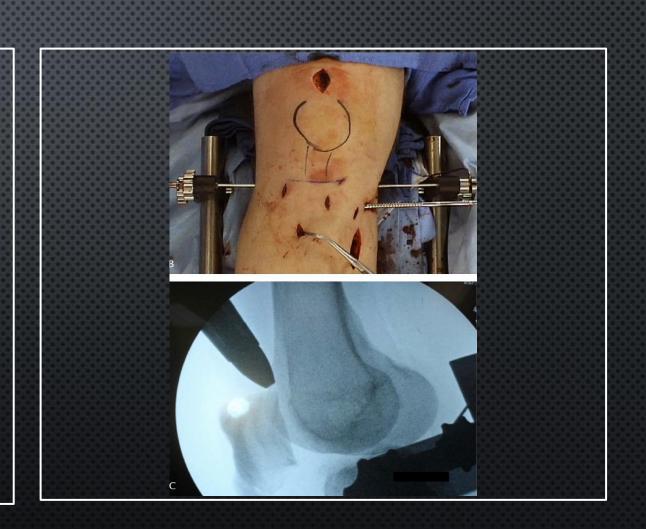
PROXIMAL FRACTURES — TIPS AND TRICKS

Semiextended nailing

Entry point

Distractor/ex.fix

Blocking pins/screws



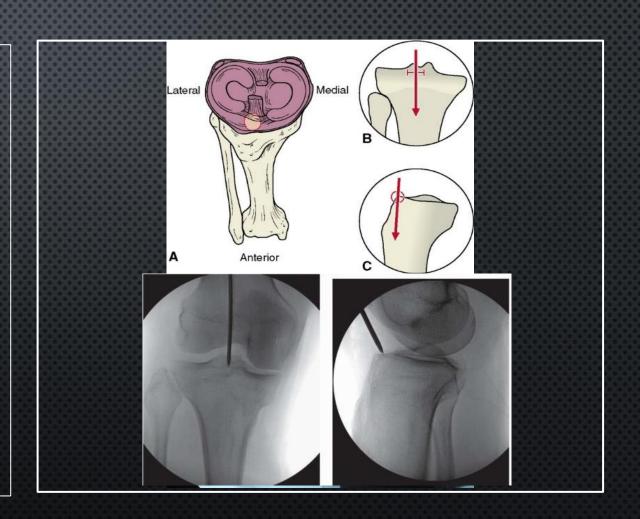
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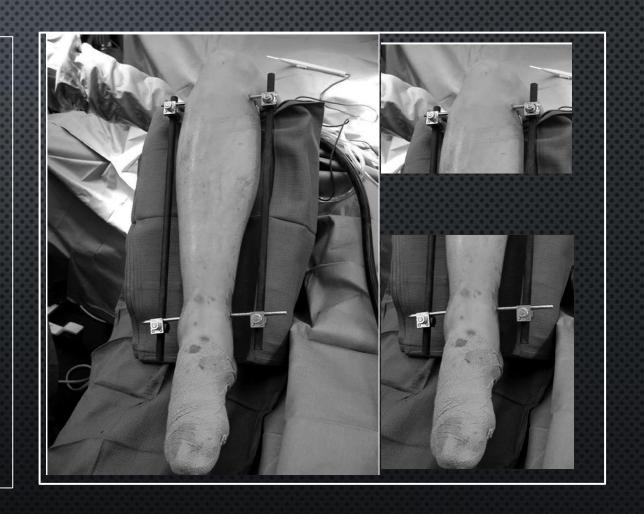
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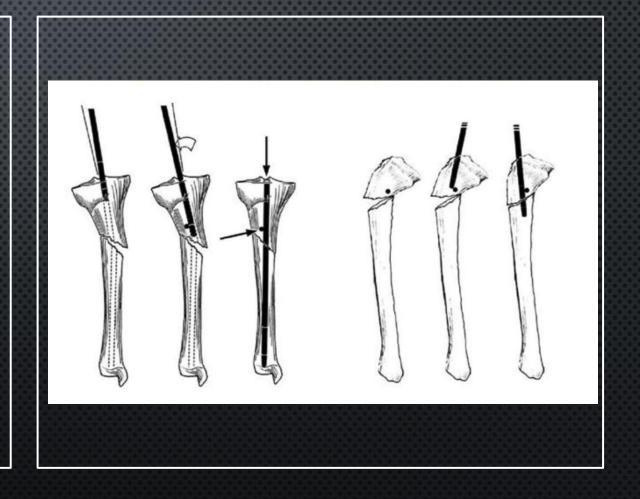
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COMBINED FRACTURE PATTERNS

COMBINED PLAFOND/SHAFT FRACTURE

UNCOMMON

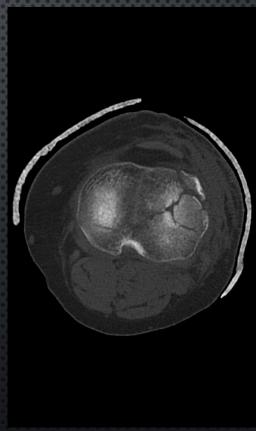
THOROUGH PLANNING

TREAT EACH INJURY SEPERATIVELY

FIX ARTICULAR FRACTURE FIRST

- KUBIAK ET AL. JOT 2008
 - 3 % OF ALL TIBIAL SHAFT FRACTURES
 - EXCELLENT RESULTS







SEGMENTAL FRACTURES

COMPLETELY ISOLATED INTERCALATED FRAGMENT SEPARATED BY TWO DISTINCT FRACTURE LINES

UNCOMMON

HIGH ENERGY . OPEN >> CLOSED

- TIME TO UNION (MEAN 34 W)
- ↑ **Infection**. Up to 30%
- ↑ **Nonunion**. 15-50%

TERAA ET AL. CORR 2013



SEGMENTAL FRACTURES

DIFFICULT TO RESTORE AND CONTROL
 LENGTH, AXIS AND ROTATION

- **USE NONINJURED SIDE** AS TEMPLATE
- DISTRACTOR FOR LENGTH
- AO- ALIGNMENT ROD
- UNICORTICAL PLATES (IF OPEN)



J Korean Fract Soc. 2013

DISTAL FRACTURES







DISTAL FRACTURES

Suspect intraarticular involvement

SECURE ARTICULAR FRACTURE PRIOR TO NAILING







DISTAL FRACTURES – REDUCTION

AIM: RESTORE LENGTH, AXIS AND ROTATION MAINTENANCE OF REDUCTION DURING HEALING

POINTED REDUCTION FORCEPS

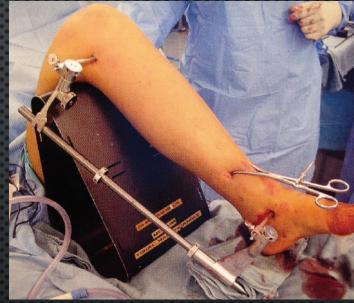
MULTIPLANAR AND ANGULAR STABLE LOCKING

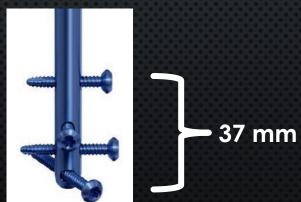
DISTRACTOR/EX.FIX

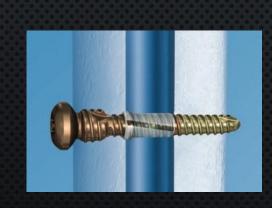
SEMIEXTENDED NAILING

BLOCKING PINS/SCREWS









«FIBULA FIXATION REDUCTION AID OR NONUNION GENERATOR»?

• FIBULA FIXATION

- ((ALWAYS)) IF PART OF ANKLE FRACTURE
 WITH SYNDESMOSIS RUPTURE
- **((NEVER)) IF COMPROMIZED SOFT TISSUES, DIABETIC**ETC
- BETTER ALIGNMENT
- HIGHER RATE OF NONUNION

TORINO ET. AL JOT 2016



DISTAL FRACTURES - PLATING

Plate vs Nail. Vallier et al. JOT 2011. | Malalignment, † union rate with plates





CAREFUL SOFT TISSUE HANDLING. APPLY AO-PRINCIPLES.

RESPECT THE SOFT TISSUES

- SOFT TISSUES GUIDES INITIAL TREATMENT DECISIONS
- SOFT TISSUES GUIDES REDUCTION STRATEGY
- SOFT TISSUES GUIDES FINAL TREATMENT

- COMPROMISED SOFT TISSUES FAVOURS
 - TEMPORARY FIXATION, INDIRECT REDUCTION TECHNIQUES AND MINIMALLY INVASIVE FINAL FIXATION



TAKE HOME MESSAGES

- COMPLEX TIBIA FRACTURES ARE OFTEN ACCOSIATED WITH SEVERE SOFT TISSUE INJURIES
- RESPECT THE SOFT TISSUES
- USE AN IMPLANT YOU ARE FAMILIAR WITH AND RESTORE LENGTH AND ALIGNMENT