

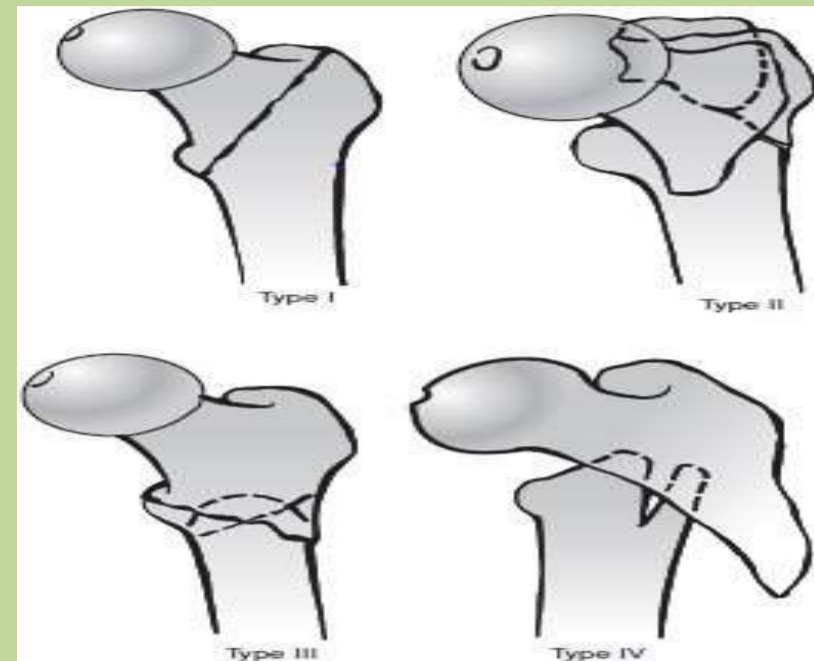
THE CLINICAL OUTCOME OF CEMENTED BIPOLAR HEMIARTHROPLASTY IN INTER-TROCHANTERIC FRACTURES OF FEMUR IN ELDERLY PATIENTS

PRESENTER: DR. THIVAGAR M JR-3, CO-AUTHOR: DR. SARATH BABU H.K., MS(ORTHO).
GENERAL HOSPITAL JAYANAGAR, BENGALURU, KARNATAKA

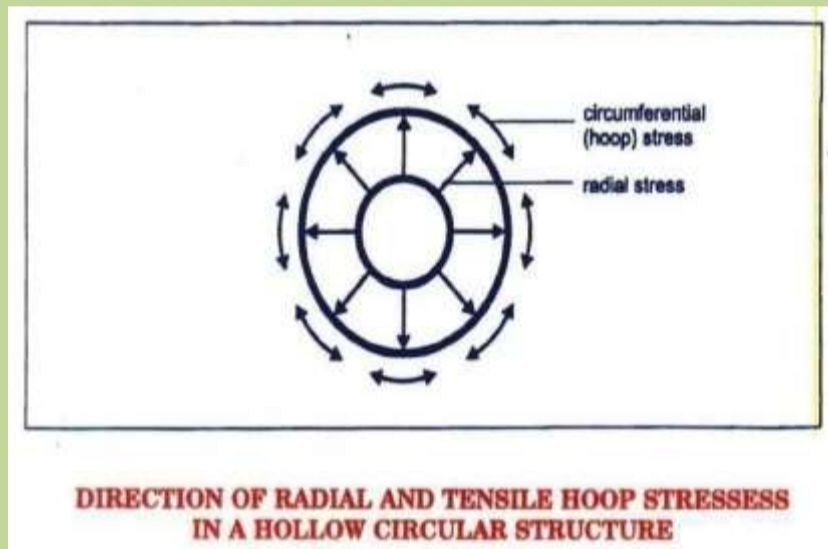
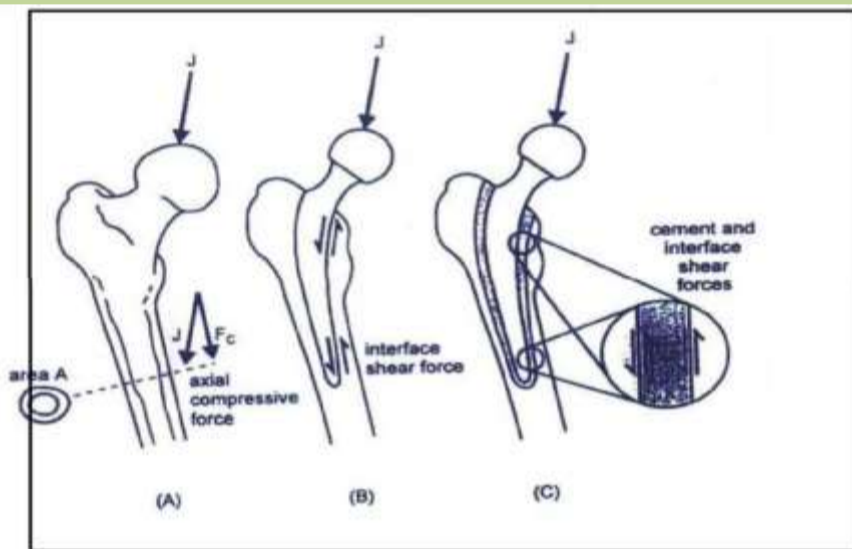
E-POSTER-236

INTRODUCTION

Fractures around proximal femur in elderly individuals lead to tremendous impact on health care system and society occurring due to moderate or minimal trauma. Primary cemented bipolar hemiarthroplasty in these patients reduces post operative complications that can occur due to prolonged immobilisation or implant failure with the advantage of quick return of the patient to their near pre-injury level.



Boyd and Griffin



DIRECTION OF RADIAL AND TENSILE HOOP STRESSES IN A HOLLOW CIRCULAR STRUCTURE

AIMS AND OBJECTIVES

To study the advantages and functional outcome of cemented bipolar hemiarthroplasty in the management of Inter-trochanteric fracture of femur in elderly patients.

MATERIALS AND METHODS

This study was conducted at General Hospital, Jayanagar, Bangalore from November 2020 to May 2022 on 10 patients with inclusion criteria being, Age >65 years, History of trauma, Type-2, 3 and 4 of Boyd and Griffin classification of Inter-trochanteric fractures treated with Bipolar Hemiarthroplasty and see the functional outcome. Pt was followed up at 3rd, 6th, 9th, and 12th month and analysed using Harris Hip score. During the procedure, the femoral stem's medial aspect is secured with medial calcar by reduction/circlage wire/calcar reconstruction with autograft. For GT #, tension band wiring done.



RESULTS

In these patients, Primary hemiarthroplasty provides adequate fixation and early mobilisation, alleviates pain and improving the overall function. It also prevents postoperative complications due to long term immobilisation like pneumonia, atelectasis, DVT, pulmonary embolism, pressure sores.

DISCUSSION

The utmost importance in the management of peri-trochanteric fractures of the femur was postero-medial cortex alignment and bone contact reestablishment. Early mobilisation with full weight bearing was started in the patients which we wont do when fixed with DHS. This reduces the complications that occurs due to delayed weight bearing. The follow-up mean Harris hip score at three, six, nine and twelve months were 70.9, 76.7, 83.4 and 89.6, respectively.



CONCLUSION

Based on the results of our study, cemented bipolar Hemiarthroplasty has good functional outcome and the incidence of complications was lower and has an advantage on longer term.

REFERENCES

1. Sancheti K, Sancheti P, Shyam A, Patil S, Dhariwal Q, Joshi R. Primary hemiarthroplasty for unstable osteoporotic intertrochanteric fractures in the elderly: A retrospective case series. Indian J Orthop. 2010;44(4):428–34.
2. Grimsrud C, Monzon RJ, Richman J, Ries MD. Cemented hip arthroplasty with a novel cerclage cable technique for unstable intertrochanteric hip fractures. J Arthroplast. 2005;20:337–43