Date : 2008-08-27
Session : Trauma: tibial fractures 2
Time : 1400-1530
Room: 404-405

Abstract number : 17946

WOUND COMPLICATION OF MINIMALLY INVASIVE PLATE OSTEOSYNTHESIS IN DISTAL TIBIA FRACTURES

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Nowadays, the use of Minimally Invasive Plate Osteosynthesis (MIPO) in the management of fracture distal tibia is common. The various advantages of the MIPO technique, namely preserving blood supply and better bone healing, had been described extensively in the literature. However, this technique is not without its complication. Among all the complications, infection is one of the commonest. In the last 3 years, we have performed 48 cases of MIPO in treating the distal tibia fractures. Our study was to evaluate the clinical outcome of these cases, with special attention to the infection rate and our experience in managing these infection cases. Our result showed that the average time when the patient started to full weight bear was 9.4 weeks. The average time for bony union was 18.7 weeks. There were 7 cases of late infection among these 48 cases. The rate was 15%. The presence of late infection had no obvious effect of the time of bony union. 25 patients (52%) have the implants removed and the commonest cause was skin impingement by the implant. The clinical presentation and the management of these late infections were discussed. In conclusion, MIPO fixation of the distal tibia fractures using metaphyseal locking plate is safe and efficient. However, complication like late wound infection and impingement are relatively common. The overall clinical outcome is still good despite the presence of these complications.