

PERI-PROSTHETIC FRACTURES IN HIP ARTHROPLASTY

Thesis

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List Of Abbreviations

1ry Primary

Ap Anteroposterior

BW Body weight

CT Computerized tomography

DCP Dynamic compression plate

HHS Harris his score

IV Intravenous

J&J Johnson & Johnson

LCP Locking compression plate

LISS Less invasive stabilization system

MRI Magnetic resonance imaging

N-C Normal to crack

N-N Normal to neck

ROM Range of motion

SGs Strut grafts

STIR Short T_1 inversion recovery

Tc99 Technetium99

THA Total hip arthroplasty

THR Total hip replacement

WBC White blood cells



NTRODUCTION

Periprosthetic fracture is a serious complications of total hip arthroplasty that can be difficult to treat and can be potentially fraught with complication⁽¹⁾.

Several categories of fracture can occur in association with hip arthroplasty. These include intraoperative fractures, intraoperative perforation of the femoral shaft, postoperative fracture of the proximal femur, traumatic and stress fractures of the femur and pelvis. As with most complications of hip arthroplasty, it is easier to prevent them than to treat sequelae⁽²⁾.

Intraoperative fractures commonly involve simple vertical splits that may occur during insertion of uncemented implants, or they may occur around the stem. The later commonly occur during revision surgery⁽³⁾.

The fracture that occur at the tip of the stem during surgery may be missed. The postoperative fractures are generally the result of an injury and are usually easy to diagnose because of pain and deformity of the thigh⁽⁴⁾.

Minor acetabular fractures probably occur more often than is recognized and the initial stability of the implant is not compromised⁽⁵⁾.

Many classifications can describe the pattern of the fracture and stability of the prosthesis. The most utilized classifications are Johansson and Vancouver classification⁽⁶⁾.

Periprosthetic fractures treatment is based on the site of fractures; implant stability and bone $stock^{(1)}$.