

hossam maghraby



شبكة المعلومات الجامعية

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



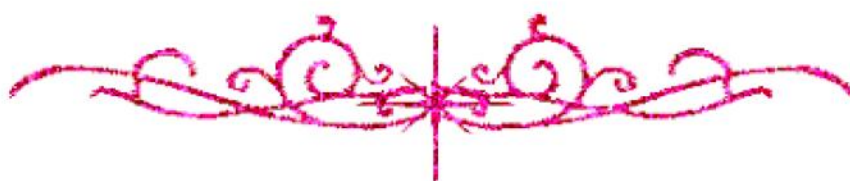
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شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



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شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

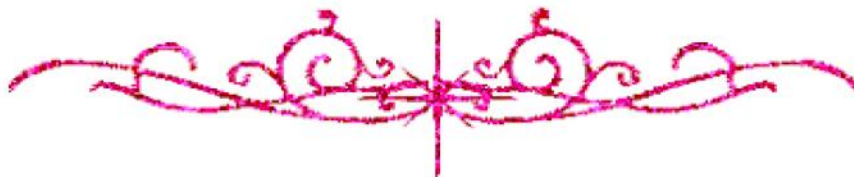
قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأقراص المدمجة قد أعدت دون أية تغييرات



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



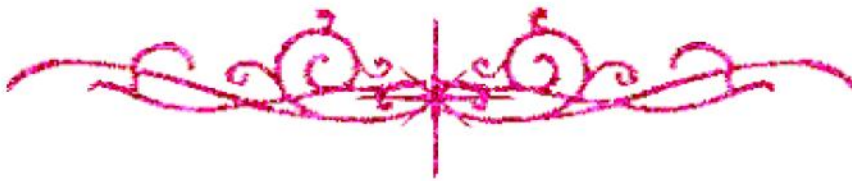
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بعض الوثائق الأصلية تالفة



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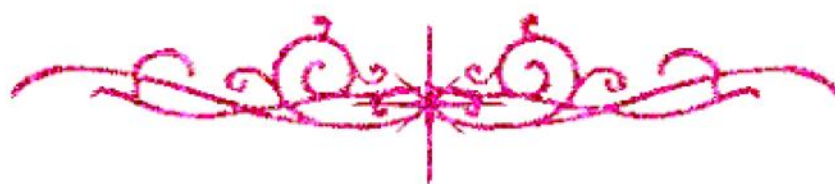


شبكة المعلومات الجامعية



بالرسالة صفحات

لم ترد بالأصل





SURGICAL STABILIZATION OF PELVIC RING DISRUPTIONS

B16605

Thesis

Submitted for partial fulfillment of the
requirements of the M.Sc. Degree in
Orthopaedic surgery

By

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1995

بِسْمِ اللّٰهِ الرَّحْمٰنِ الرَّحِیْمِ

قال تعالى:

(وَأَنْ لَّيْسَ لِلْإِنْسَانِ إِلَّا مَا سَعَى *

وَأَنْ سَعْيِهِ سَوْفَ يَرَى *

ثُمَّ يَجْزَاهُ الْجَزَاءَ الْأَوْفَى *)

صدق الله العظيم

سورة النجم: آية (٣٩-٤١)

Dedication

To my parents

for their constant encouragement and support

To my wife

for her devotion and understanding



ACKNOWLEDGEMENT

ACKNOWLEDGMENT

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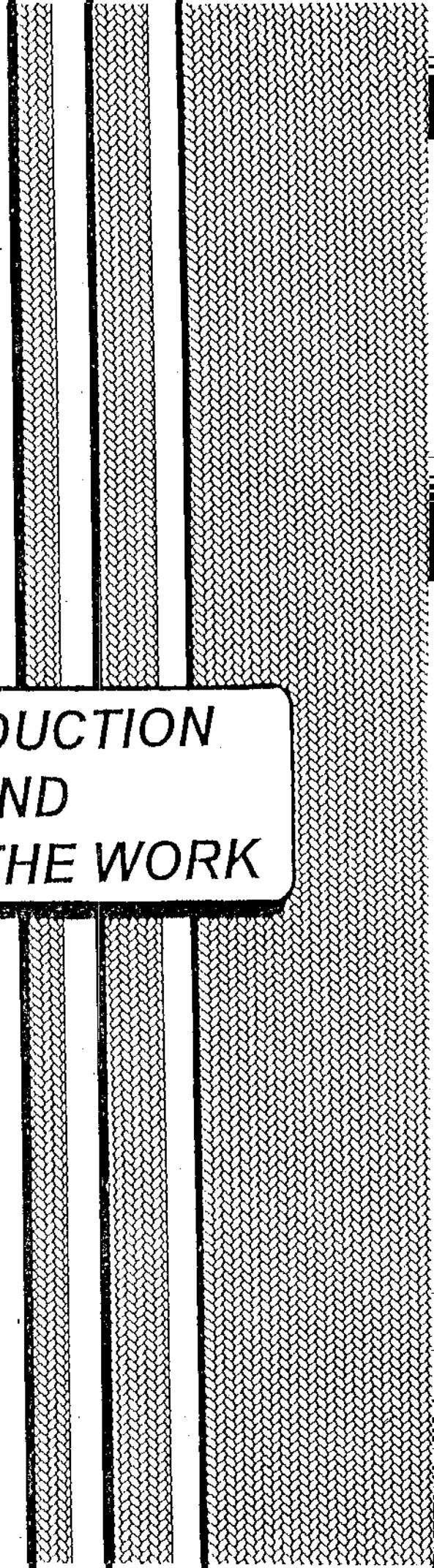
AMR EL-SAYED

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**INTRODUCTION
AND
AIM OF THE WORK**

INTRODUCTION AND AIM OF THE WORK

Disruptions of the pelvic ring represent a formidable problem in orthopedic management and continue to be a major challenge to surgeons dealing with trauma. Although the incidence of pelvic ring disruptions constitutes only about 3% of all skeletal injuries (Brooker and Edwards, 1979), their associated mortality, between 5 and 20% (Rothenberger et al., 1978) is disproportionately high as the forces necessary to disrupt the pelvic ring in a young individual are massive, therefore, injury to associated organs are common and often life threatening.

Previously, conventional orthopedic wisdom held that surviving patients with disrupted pelvic ring recovered well clinically from their musculoskeletal injury. However, the literature on pelvic trauma was mostly concerned with life threatening problems and paid scant attention, if any, to the late musculoskeletal problems reported in a handful of articles published prior to 1980. In spite of the clinical impression that most patients do well, some authors have suggested otherwise. Nevertheless, there were general agreement that the final results are clearly dependent on the fracture type; those patients with stable fractures have few long term problems, while those with unstable types often exhibit major residual disabilities.

Historically, immobilization of an unstable pelvic ring disruption has been achieved by bed rest, a pelvic sling, skeletal traction, or hip spica cast. All of the non-operative methods of immobilization are consistent with a prolonged period of recumbency associated with an increased risk of pulmonary, thromboembolic, and urologic complications. Moreover, a