

Minimally Displaced Transverse Acetabular Fracture

OsteoCentric 7.0mm & 8.0mm Large Cannulated and 3.5mm Long Fastener Systems

Case Study | Dr. Ravi Karia

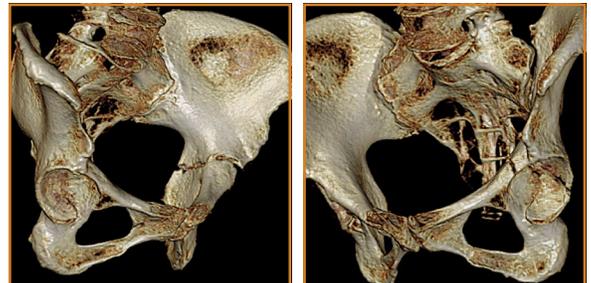


Patient History

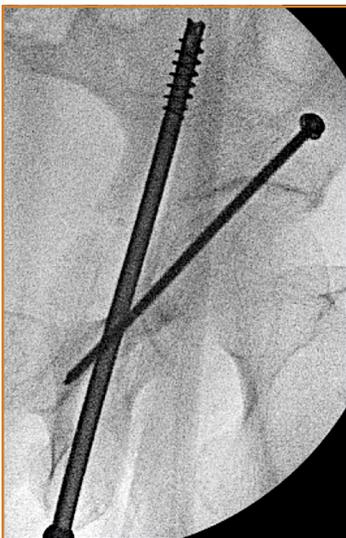
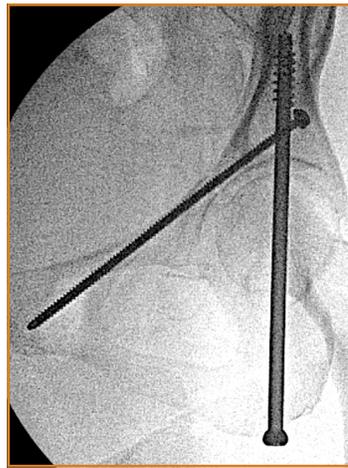
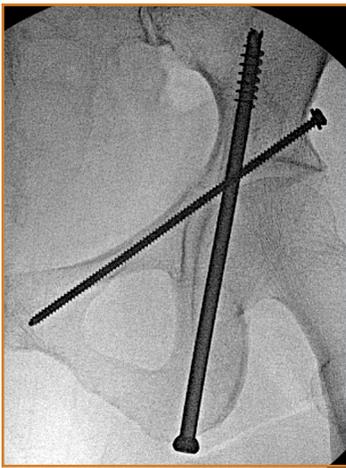
73 year old female with multiple medical comorbidities presents after a ground level fall. She is diagnosed with a minimally displaced transverse acetabular fracture. She was unable to tolerate any type of mobilization.

Pre-Op Surgical Plan

Given her pain level and inability to mobilize, operative fixation of her fracture was deemed appropriate. Pre-operative advanced imaging showed pathways available for percutaneous screw placement.



Pre-Op

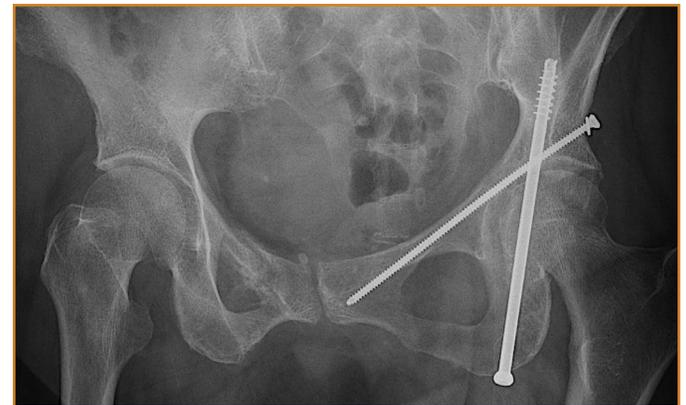


Surgical Procedure

Patient was placed in a supine position on a radiolucent table and deep sedation alone was given due to secondary medical comorbidities. Multiple fluoroscopic views were performed and the patient received two percutaneous fasteners. The anterior column pathway was quite narrow and could only accept a 3.5mm fastener. Posterior column pathway was able to accept a 7.0mm cannulated fastener.

Follow Up

Physical therapy worked with this patient a few hours after surgery and she was able to walk 70 feet with assistance of a rolling walker. She was discharged post-op day 1. By 6 weeks post-op, the patient was ambulating well and had zero pain complaints.



Intra-Op

Post-Op

Clinical Advantages of UnifiMI

The Osteocentric fastener design was quite helpful in maximizing purchase in the patient's compromised bone. The confidence in this fixation was important in allowing the patient to be made weight-bearing as tolerated. Lastly, the option to have both 3.5mm and 7.0mm fastener diameters was required in this surgery.

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