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= Abstract =

Treatment of Long Spiral Comminuted Fracture of the Shaft of Humerus Using Multifilament Cerclage Cables and External Fixator.

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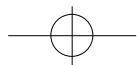
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Long spiral comminuted fracture of the shaft of humerus, which is more common today than in the past, is one of the most difficult fractures to treat and remains challenge to orthopaedic surgeons. From Feb. 1995 to Nov. 1996, We have treated 6 cases of long spiral comminuted fracture of the shaft of humerus by internal fixation with multifilament cerclage cables combined with external fixation, and achieved bony union in all cases at average 4 months and good clinical results. The advantages of this operation method are minimal damage to the adjacent soft tissues by relatively small exposure, minimal internal instrumentation, early mobilization and the need of secondary operation for implants removal is eliminated. Also, It may be suggested that the author's operative method is one of the solutions for treatment of long spiral comminuted shaft fracture of humerus involving metadiaphyseal area.

Key Words : Humerus, Long spiral comminuted fracture of the shaft of humerus,
Multifilament cerclage cable, External fixation.

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(Fig 2-A,B,C).



Fig 1-A. Preoperative AP roentgenograph of a 31-years-old man with comminuted metadiaphyseal fracture of the right humerus.

B. Immediate postoperative AP and lateral roentgenographs.

C. AP roentgenographs at post-op 4 months showed bony union after external fixator was removed.

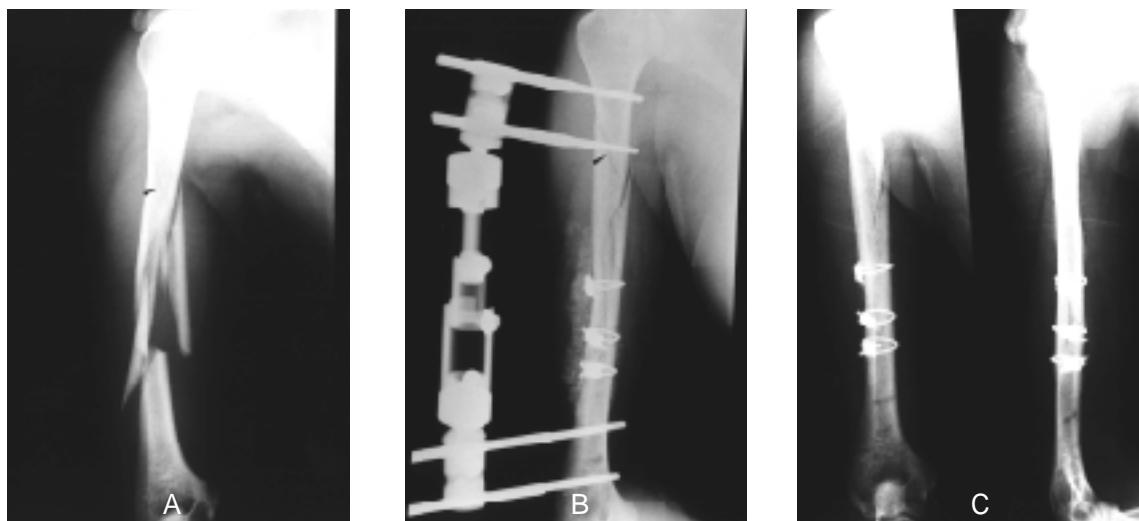
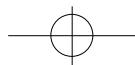


Fig 2-A. Preoperative AP roentgenograph of a 45-years-old woman with comminuted diaphyseal fracture of the right humerus.

B. Postoperative AP and lateral roentgenographs.

C. AP roentgenographs at post-op 4 months showed bony union after external fixator was removed.

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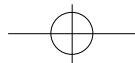
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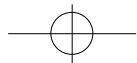
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