

9

,

* 2000

**Table 1.** (1-5 : Retrograde screw fixation, 6-8 : pull-out wiring)

No	Cause	sex/age	Combined injury	union time	fracture type	Complication
1	TA	M/38		6 wks	III	
2	TA	F/28	Lat. meniscal injury	7 wks	II	Ant. instability
3	TA	M/41	fibular fracture	6 wks	II	
4	Fall	M/35	LCL injury	8 wks	III	Arthrofibrosis
5	TA	M/43	Lat. meniscal injury	6 wks	III	
6	TA	M/32		7 wks	II	
7	TA	M/35	MCL injury	7 wks	III	
8	TA	M/36	Lat. meniscal injury	8 wks	III	

1,5,7)

Meyer McKeever⁹⁾Meyers McKeever⁵⁾

I

2 2 , 3 6 .

, II 1/2

3 ,

, III A,B

1 , 1 , 1

2,5,6)IIIA

가7 , 가1

, IIIB

28 43 36 20 가1 , 30

가5 , 40 가2 . 6 24

Berg¹⁾

I, II

16 . 7

4 , 2 ,

III

1 1 . 5

, 3

II

.(Table. 1)

가 I

Takeo Kenji⁸⁾

2.

가

motorized shaver

5cm

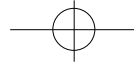
2cm

1.

1997 3 1999 2

8

, , , .



490 •

/ 13 3

8mm

2

가 26-gauge

5 3

6.5 , 7

1

4 3

가 1 6

98 ,

105

Lysholm Knee Score Scale 90 6

, 80 2

가 35

가

4.0mm

.(Fig 1.A,B)

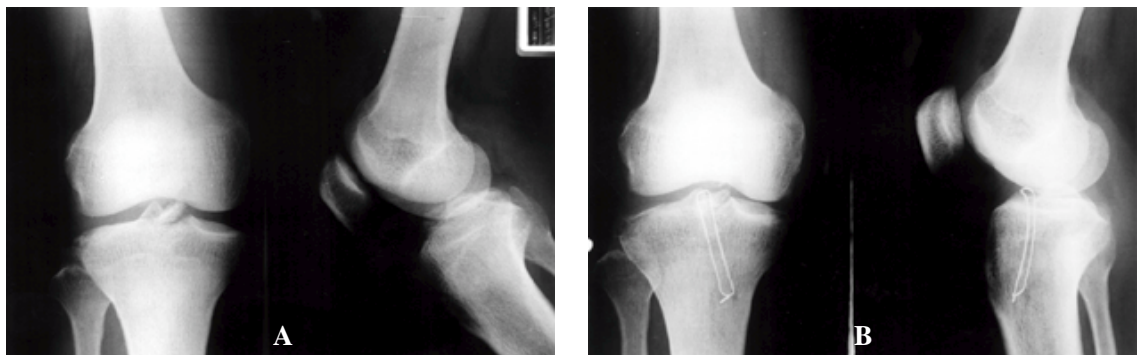
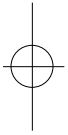
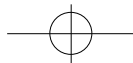


Fig 1A. Type III tibial intercondylar eminence fracture Preoperative X-rays.

1B. Pull-out wiring was achieved.





28

3).

.(Fig

2.A,B)

가가

Matjaz³⁾

1 Meyer Mckeever 3

.(Fig. 3.A,B)

McLennan⁴⁾

K-

Seneki Kazuo⁷⁾

K-

가

Takeo Kenji⁸⁾

15mm

(antegrade cortical screw fixation)

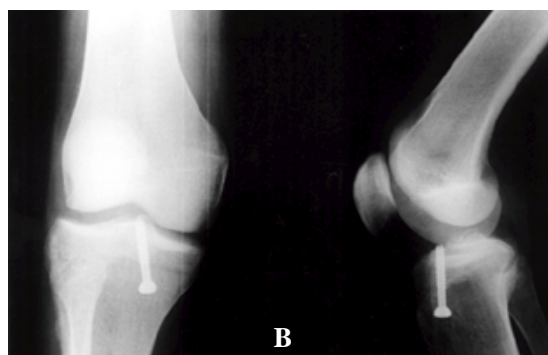


Fig 2A. Type II tibial intercondylar eminence fracture combined with lateral meniscal injuries.

2B. Retrograde screw fixation was achieved with mild anterior instability remained postoperatively.

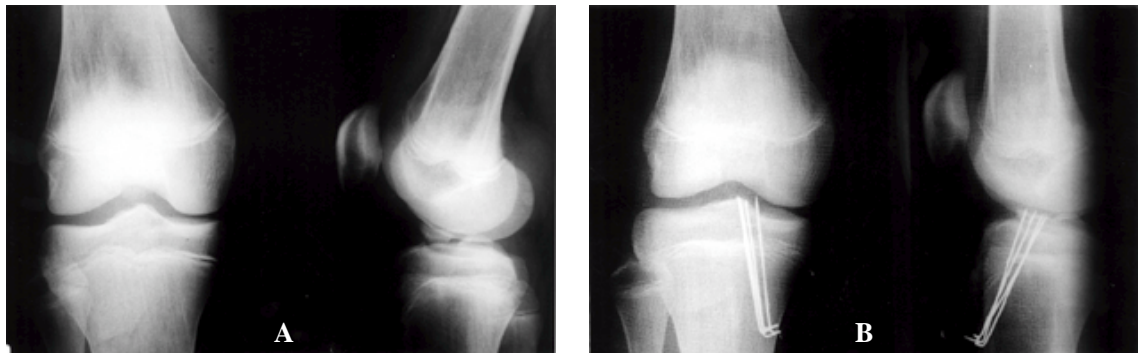
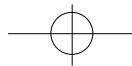
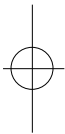
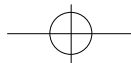


Fig 3A. 16 year old boy sustained Type III tibial intercondylar eminence fracture.
3B. Multiple percutaneous pinning was achieved.

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Abstract

Arthroscopic Treatment of The Tibial Intercondylar Eminence Fractures

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Purpose : To compare operative results between pull-out wiring and retrograde screw fixation for displaced tibial intercondylar eminence fracture.

Materials and Methods : From March 1997 to February 1999, authors carried out pull-out wiring in 3 patients and retrograde screw fixation in 5 patients who sustained typeII and typeIII displaced tibial intercondylar eminence fractures follow up for 16 months(mean).

Results ; The Union time was mean 7 wk in pull-out wiring and 6.5 wk in retrograde screw fixation. Limitation of knee motion(1 case) developed in retrograde screw fixation group and reoperated for adhesiolysis. Pull-out wiring group were all full motion recovered.

Anterior instability(1 case) developed in retrograde screw fixation group and pull-out wiring group had no instability. Operation time for retrograde screw fixation group was mean 98min and pull-out wiring group was 105 min.

Conclusion : The outcome of pull-out wiring group were superior to retrograde screw fixation group. It can be stably fixed and allow early motion exercise. Besides, in case of small bony fragment, it is difficult for fixation with screw. And even impossible.

In child cases, the multiple percutaneous pinning can lead to good result. So authors believe that pull-out wiring is worthy for tibial intercondylar eminence fracture.

Key words : tibial intercondylar eminence fracture, pull-out wiring, retrograde screw fixation

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