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 2 (Fig.1.A). 3 8cm
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: 가 685,
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 FAX : +82.42-545-2373
 E-mail : hy0707@unitel.co.kr

* 2001

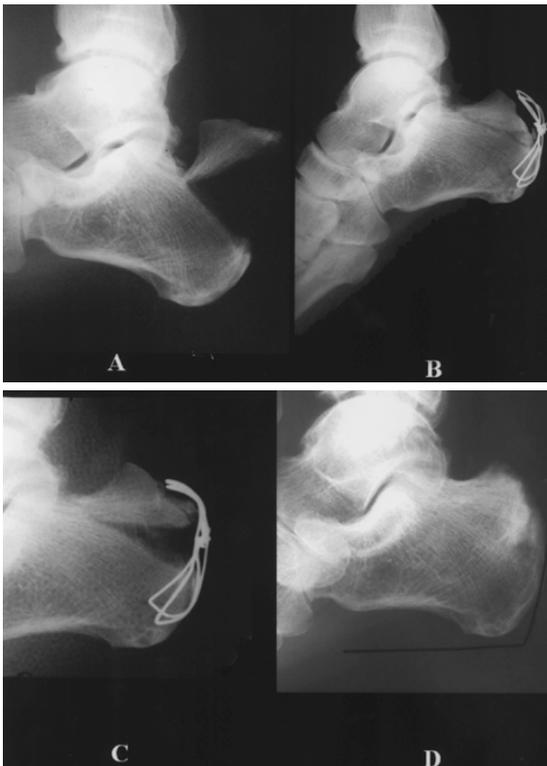


Fig. 1A-D : (A) The initial X-ray shows the avulsion fracture of the superior portion of the calcaneal tuberosity with marked displacement. (B) The postoperative X-ray shows the fragment is reduced, restoring the length of the Achilles tendon with double tension band wiring. (C) The follow-up X-ray shows the displacement of the avulsion fragment at postoperative 10 weeks. (D) At postoperative 1 year, the union of the fracture is viewed after the removal of the implant.

(Fig.1.B).

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(Fig.1.C).

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(Fig.1.D).

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0.5m

(Fig.2.A).

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(Fig.2.B).

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(Fig.2.C).

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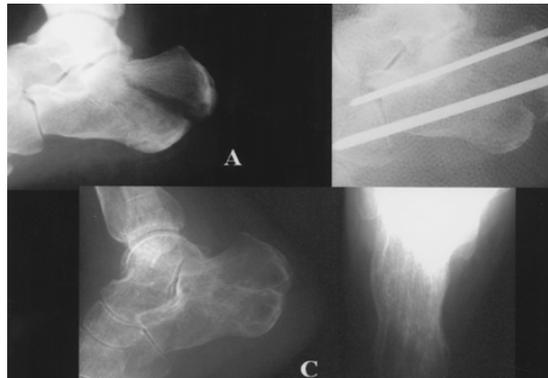


Fig. 2A-C : (A)The initial X-ray shows the avulsion fracture of the superior portion of the calcaneal tuberosity with moderate displacement. (B)The postoperative X-ray shows the fragment is reduced with 2 Steinmann pins under the image intensifier. (C)At postoperative 1 year, the union of the fracture is viewed.

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Abstract

Avulsion Fracture of the Calcaneal Tuberosity - 2 Cases Report -

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Fractures of the calcaneus have received much attention because a large number involve the subtalar joint. Avulsion fracture of the tuberosity of the calcaneus is rare injury, and it is reported that the avulsion of the calcaneal tuberosity accounted for less than 1 % of these injuries. We have experienced two cases of avulsion of the calcaneal tuberosity and report these cases.

Key Words : Calcaneal tuberosity, Avulsion fracture

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