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[ ]

: 18

: 1999 5 2001 6 -  
18 Robinson

1 7, 2A 7, 2B 1, 2C 3, 가  
2.6±1.1 cm (0~5)

: 10 7 . 4

1 Poller  
20 (12~40 ) . Blaird  
92.5 . 1 9 (antecurvatum)

:  
, 가 ,

: , - ,

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23 (12~36 ) . , , , Blaird 2) 가 , 가 11 , 가 7 , 14 , Tscherne 17) I 3 , II 1 . 4 , Gustilo 9) I 2 , II 1 , IIIA 1 . 11 , 가 7 , Robinson 19) 1 7 , 2A 7 , 2B 1 , 2C 3 . 가 2.6±1.1 cm (0~5 cm) , 10 . 6.5 (1~14 ) .

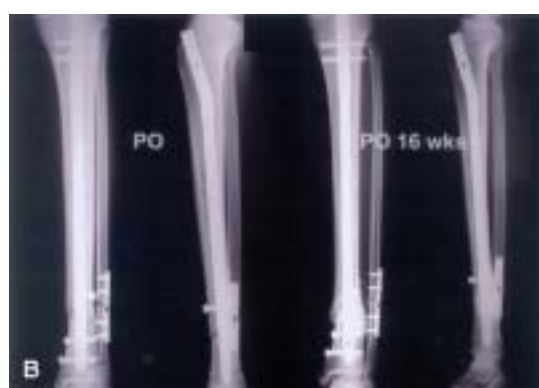
1999 5 2001 6 - 23 . IIIA 1 mm (malalignment) Poller



**Fig. 1A.** Preoperative radiograph shows comminuted distal tibial fracture which is extended to the ankle joint.

**1B.** Postoperative radiograph shows that the distal tibial fracture was fixed by intramedullary nail without extension of fracture. Postoperative 28 weeks radiograph shows union without angular deformity.

가  
(M/DN Nail, Zimmer, 74 (37~92)  
USA) 14 (Fig. 1A, 1B), 10 7  
가  
(Dyna Nail, U&I, Korea) 4 (malalignment) Poller  
(Fig. 2A, 2B).  
가 K 2 가 16 ,  
3 가 2 ,  
가 6 ,  
11 (8~12 )  
2 20 (12~40 ) , 2  
3 12 (dynamization)  
4  
2 4 4 20 (15~25 )  
10 (5~15 ) , 2  
10 . Blaird  
92.5 , 6  
5 , 8 , 4  
1 9 (ante-  
curvatum)  
3 2



**Fig. 2A.** Preoperative radiograph shows distal tibial and fibular fracture.

**2B.** Postoperative radiograph shows that the distal tibial fracture was fixed by intramedullary nail with one blocking screw which was used to correct valgus deformity. The distal fibular fracture was fixed by plating. Postoperative 16 weeks radiograph shows that the fracture has healed in correct alignment.

. ,  
 20)  
 18 15 14 93%  
 ,  
 20  
 . Freedman 7)  
 ,  
 8%  
 , 6,12) 12) 9%  
 ,  
 , Ilizarov 2 (dyna-  
 mization)  
 , 1  
 9  
 (malalignment)  
 ,  
 가 가 14)  
 Krettek 13)  
 가  
 3,16) Ilizarov  
 , Poller  
 (malalignment)  
 Poller  
 가 1  
 (alignment) 가 가  
 , Poller  
 1)  
 가  
 가 20)  
 10)  
 , Richter 18)  
 5 cm 11) 22%  
 7  
 Mosheiff 15) 96%  
 Robinson 19)  
 가

가 , 22.2% .

Hahn <sup>10)</sup> 250 5 1

가 , 가 , 2 92.5 77.8% .

가 , .

가 .

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## Abstract

### Intramedullary Nailing in Distal Tibial Meta-Diaphyseal Fracture

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**Purpose:** This study was undertaken in order to evaluate the efficiency of the closed intramedullary nailing in 18 cases of distal tibial fractures.

**Materials and Methods:** From May 1999 to June 2001, eighteen patients were treated by closed intramedullary nailing for distal tibial meta-diaphyseal fracture. According to Robinson classification, there were 7 type 1 fractures, 7 type 2A fractures, 1 type 2B fractures, and 2C type fractures. The mean distance between distal end of fracture and tibial plafond was  $2.6 \pm 1.1$  cm (0~5 cm). We evaluated both clinical and radiographic parameters.

**Results:** Plate fixation of distal fibular fracture was performed in 7 cases. Poller screw was used in 4 cases which showed malalignment after insertion of nail. The mean score was 92.5 point by Blaird ankle scoring system. All patients got the bone union at average of 20 weeks (12~40 weeks). One patient had a antecurvatum deformity of 9 degrees.

**Conclusion:** Intramedullary nailing for distal tibial fractures is one of the safe and reliable method for managing these injuries.

**Key Words:** Fracture, Distal tibial meta-diaphysis, Intramedullary nailing

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