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= Abstract =

Surgical Treatment for Displaced Talus Fracture-Dislocation

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Talus fracture is an uncommon fracture and frequently accompanied with serious complications such as avascular necrosis, nonunion and osteoarthritis. The purpose of this paper is to assess the effectiveness of open reduction and internal fixation in treatment of displaced talus fracture. Fourteen patients with severely displaced talus fracture-dislocation, classified as more severe than Hawkins type and comminuted body fracture were evaluated. They were treated at Keimyung University Dongsan Medical Center during the period of July 1989 to August 1996. The average period for follow up was 53 months, ranging from 18 months to 8 years.

All patients were treated by open reduction and internal fixation using screws except 2 cases of severe talar body fractures, which were treated by Blair fusion. According to Hawkins scoring system, the end results were excellent only in 4 cases, good in 2, fair in 5, poor in 3. Avascular necrosis developed in 3 cases and traumatic arthritis in 5 cases.

In conclusion, displaced talus fracture-dislocation had a high incidence of postoperative complications(57 %) in spite of early surgical treatment. It is essential to consider about possible complications and sequelae before operation is performed.

Key Words : Talus, Fracture-Dislocation, Surgical Treatment.

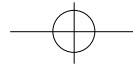
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*

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0.14% 0.32% (Table 1) Hawkins 가

60% 가 ,

6,25)

14 53

1. 14 가 10 , 가 4
20 가 8 가 .

2. 7 가 ,
6 , 1 .
1

1989 7 1996 8

가 26 ,
14

Hawkins 18,19) 3
8 53 .
2

2 Blair
11 5.0mm

1

3. 14 가 ,
9 .

4. Hawkins
(Fig 1-A,B) 8 , 6 , 2

5. 2 Blair .
1 ,
1 .
,
, 11 5.0mm
, 1

Table 1. Hawkins scoring system

Pain	point	Limp	point
None	6	Absent	3
After activity	3	Present	0
Ankle ROM*		Subtalar ROM*	
Full	3	Full	3
Limited	2	Limited	2
Fused	1	Fused	1
Fixed deformity	0	Fixed deformity	0

Excellent 13 - 15 (points)

Fair 7 - 9

Good 10 - 12

Poor 6 or less

* Range of motion

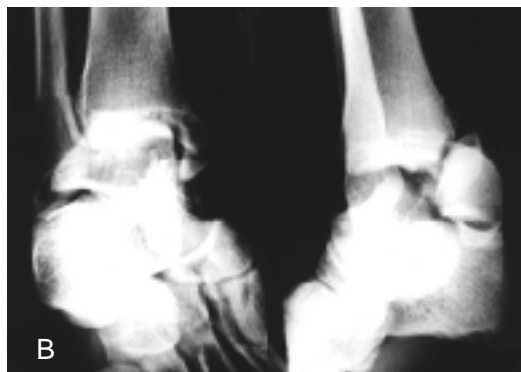
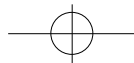


Fig 1. 24-year-old-man, Talus neck fracture with subtalar dislocation and ankle dislocation(Type).

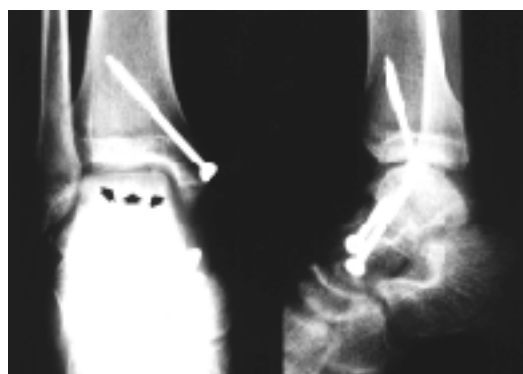
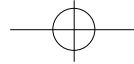


Fig 2. Seven weeks after surgery, Hawkins sign was seen.



Fig 3. Twenty months after surgery, fracture site was united and collapse of body was not

6 8 , 4 , 2 , 5 , 3
, Hawkins 가
. 가 14 11
. 30° 50°
10° 20-25°
6. Hawkins 가 (Table 1)
4 grade , 12 7.
6 8 Hawkins sign 5 8 , 14 5
(Fig 2),
, Hawkins 가 12



, 5 2 4 1
가

20-30
17,20,23),

3 5 가 3 가
11,12,15,18,22),

1 가 5.0mm 가

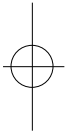
(Fig 3). 14 8 11,13,22), 가
(57%) , Blair -

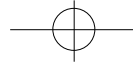
13,27), Adelaar^{8,9} Hawkins
3 , 2
3-5mm ,
5

가 가
8-10,19,29)

60%가 12,18,19)
가 1-3,5-7,16,23)
15) 5 1
1,4,6,18,19,29)
12,15,25,26) Peterson²⁸ (Arthrofibrosis),
(dorsal exostosis),
21,24,30) Hawkins¹⁸ 1 0%, 2
가 50%, 42%, 42%, 3 91%,
7.2% , 58% 가
가 가 14 3 (21%)
가
가
가
MRI가
가 9),

¹⁹. Kenwright Taylor²², Hawkins¹⁸
52-60%



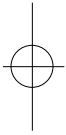


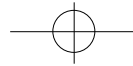
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