

12 , 4 , 1999 11

The Journal of the Korean Society of Fractures
Vol.12, No.4, November, 1999

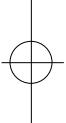
Ilizarov

= Abstract =

Treatment of Comminuted Tibial Fractures using Ilizarov Method

Eui-Hwan Ahn, M.D., Sung-Tae Lee, M.D. and Hyeon-Seok Kang, M.D.

*Department of Orthopaedic Surgery, Seoul Hospital, College of Medicine,
Konkuk University, Seoul, Korea*



From March 1996 to March 1999, thirty two cases of comminuted tibial fractures were treated with Ilizarov external fixator. 13 cases were closed fractures and 19 cases open fractures. Among 19 open fractures, there were 3 cases of Gustilo type I, 10 cases of type II and 6 cases of type III fractures. All the cases could not be initially treated by open reduction and internal fixation because of open wound or severe comminution. Among 32 cases, 4 were tibial condyles, 22 were tibial shafts, 6 were tibial plafonds. All the cases were followed up from a minimum 12 months up to 35 months with an average of 22 months.

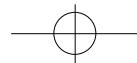
We obtained satisfactory bony union in all cases with the average duration of 18.1 weeks. Bone graft was done initially in two cases. Numerous complications were encountered, most commonly, joint stiffness and pin tract infection were developed but they were treated well. To avoid such complications, careful management was needed. According to Tucker's classification, the result was graded as excellent in 8, good in 18, fair in 4 and poor in 2 cases.

We conclude that Ilizarov external fixator is a very useful method for initial treatment in getting reduction, maintenance of reduction, early ambulation and fracture healing in cases of

1 (143-130)

Tel : (02) 450-9538
Fax : (02) 458-1134





communited tibial fractures whether open or closed.

Key Words : Tibial fracture, Comminuted, Ilizarov external fixation

2 (6.3%)

가가

4.

4 (12.5%), 22

(68.8%), 6 (18.7%) (Table 1),

Table 1. Site of Fracture

Site of Fracture	No. of cases(%)
Condyle	4(12.5%)
Shaft	22(68.8%)
Plafond	6(18.7%)
Total	32(100.0%)

19 (59.4%),

13 (40.6%) . 19 Gustilo-

Anderson 14) 3 (15.8%), 10

(52.6%), 6 (31.6%) (Table 2).

Table 2. Type of Fracture

Type of Fracture	No. of cases(%)
Closed	13(40.6%)
Open	3(9.4%)
Gustilo A	10(31.2%)
Gustilo B	3(9.4%)
C	0(0.0%)
Total	32(100.0%)

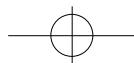
5.

32 18 (56.3%)

10 (55.6%) 가

6 (33.3%), 1 (5.6%), 1 (5.6%)

24 (75%), 6 (18.7%),



918 •

/ 12 4

6.			24		24
	7.4	,		4	
25	C-arm		.		4
Ilizarov	,				Ilizarov
4		1 ,	1		4
		Ilizarov	28.5	32	(53.1%)
,		1	,		9 (52.9%),
		Ilizarov	6 (35.3%),	2 (11.8%)	(Table 4).
1		1			
†					
1					
2		Ilizarov			
12	tension device				

Table 4. Complications

Complications	No.of cases(%)
Joint stiffness	9(52.9%)
Pin tract infection	6(35.3%)
Angular deformity	2(11.8%)
Total	17(100.0%)

Anderson 14)

6 , 2
B 3 1Gustilo-A
A 3 1

9

3 , 6
1

1

		2	Ilizarov ring
		2	1
†		15 , 1	15
		.	12
16	24	† 12 (37.5%)	Tucker 38 22 (Table 5)
		† 18.1	18 , 4 , 2
			8 ,

(Table 3),

Table 3. Duration of Bone union

Duration of Bone union(weeks)	No.of cases(%)
0 - 12	2(6.2%)
12 - 16	8(25.0%)
16 - 20	12(37.5%)
20 - 24	6(18.9%)
24 - 28	2(6.2%)
28 - 32	2(6.2%)
Total	32(100.0%)

2

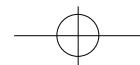


Table 5. Functional result of tibial fracture according to Tucker's classification(1991)

Criteria	Excellent	Good	Fair	Poor
Bony union	+	+	+	+
< 1cm shortening	+	One criteria missing	Two criteria missing	Three criteria missing
< 7 degree angulation	+			
< 15 degree rotational deformity	+			
Full knee extension	+			
> 125 degree of knee flexion	+			
>75% normal ankle motion	+			
No infection	+			

Ilizarov device	12	tension	< 2>	
17	.		34	
Tucker	2	, 3	20	Gustilo type 7
	.			
				26

(Fig. 1-A,B,C). Ilizarov

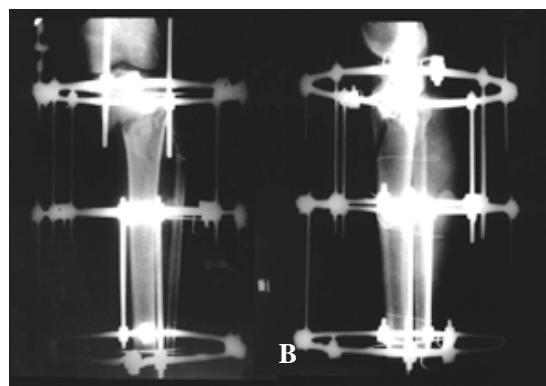
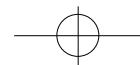


Fig 1. A 37-year-old male patient with left tibial bicondylar open comminuted fracture by traffic accident.

1-A. Preoperative radiograph shows intra-articular proximal tibial bicondylar fracture.

1-B. Immediate postoperative radiograph after closed reduction with Ilizarov external fixator.

1-V. Postoperative 27 months radiograph shows complete bony union.



920 •

/ 12 4

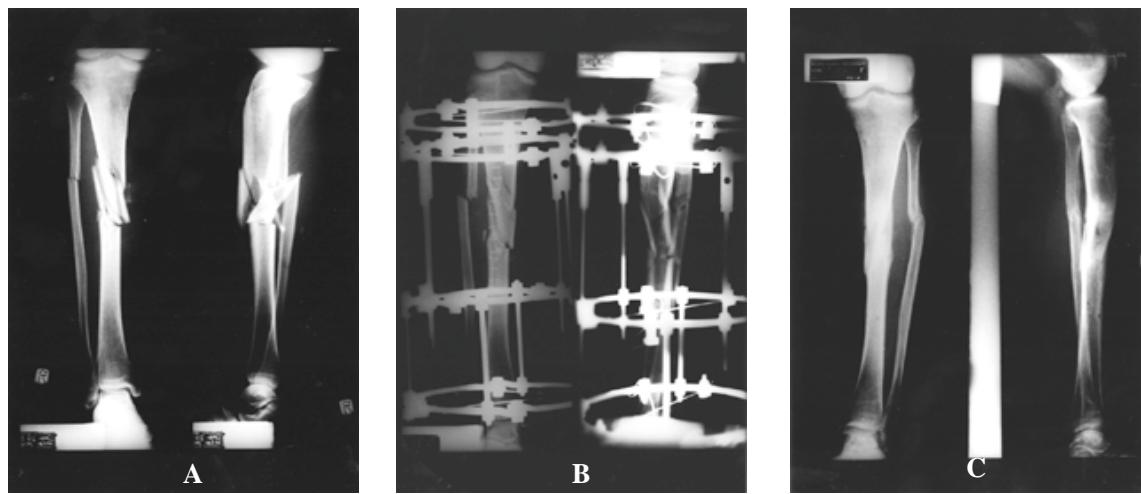


Fig 2. A 34-year-old female patient with right tibial shaft open segmental comminuted fracture by traffic accident

2-A. Preoperative radiograph shows segmental comminuted tibial shaft fracture.

2-B. Immediate postoperative radiograph after closed reduction and limited open reduction with Ilizarov external fixator.

2-C. Postoperative 20 months radiograph shows complete bony union.

29
1 8 Tucker
(Fig. 2-A,B,C).

가 가

< 3>

34

가

1)

6

Ilizarov

가

가

rush

16

가

Ilizarov

1952

11

rush

14,26)

18

,

1 8

Tucker

가

(Table 3-A,B,C).

7,8)

가

Ilizarov

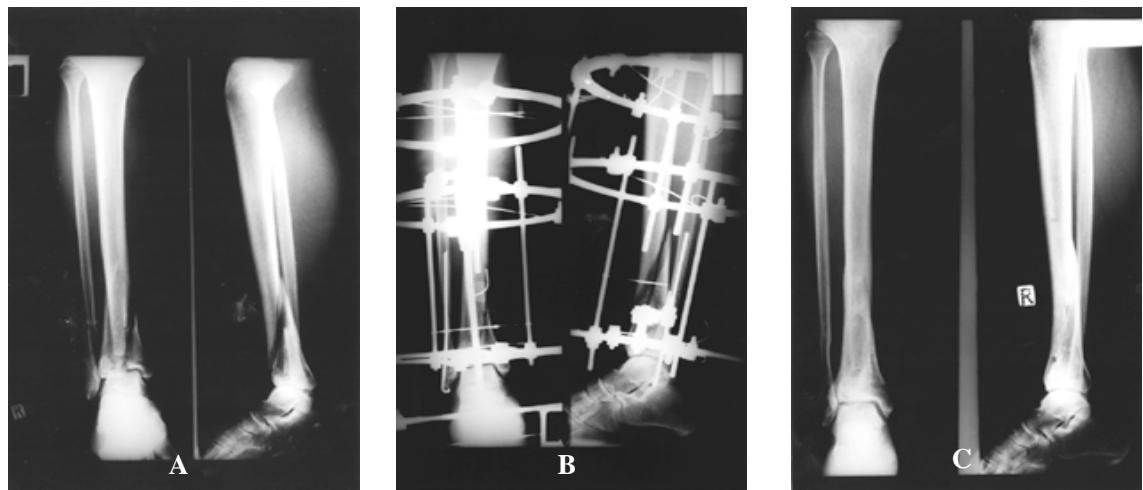
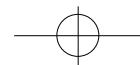


Fig 3. A 34-year-old male patient with right pilon fracture by fall down.

3-A. Preoperative radiograph shows intra-articular comminuted distal tibial fracture and distal fibular shaft fracture.

3-B. Immediate postoperative radiograph after closed reduction with Ilizarov external fixator and rush pin.

3-C. Postoperative 20 months radiograph shows complete bony union.

가

Ilizarov

18.1

75%

가

, 1cm

가 가

25%

5,12,15,16)

11,21)

Sarmiento^{23,24,25)}

17.4 ,

5%

가

21.7 가

Brown⁹⁾

5 μm
가
²²⁾ Green¹³⁾

5 μm

가

AO 가

가

83-100%

Bach⁶⁾

100%,

6-8

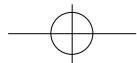
Taylor²⁷⁾, Tucker²⁸⁾

Ilizarov

94-100%,

2-3
3,4)

4-12



- Clin Orthop*, 178:111-120, 1983.
- 9) **Brown SA, Gillett NA and Broaddus TW :** Flexible versus nonflexible fracture fixation. In Lane, J.M.(ed.) : Frature Healing. London, Churchill Livingstone, 1987.
- 10) **Burgess AR, Brumback RJ and Bosse MJ :** Management of Open Grade tibial fratures. *Clin Orthop. N. Am*, 18:85-93, 1987
- 11) **Ellis H :** The speed of healing after fracture of the tibial shaft, *J Bone Joint Surg*, 40-B:42-46, 1958.
- 12) **Fleming B, Paley D, and Kristiansen T :** A biomechanical analysis of the Ilizarov external fixator. *C/in Orthop*, 241:95-105, 1989
- 13) **Green SA :** Complication of External Skeletal Fixation. *Clin Orthop*, 180:109-116, 1983.
- 14) **Gustilo RB and Anderson JT :** Prevention of infection in the treatment of one thousand and twentyfive open fractures of the long bones. *J Bone Joint Surg*, 58-A:453-458, 1976.
- 15) **Ilizarov GA :** *Transosseous osteosynthesis*. 1st ed. Springer-Verlag, 369-452, 1992
- 16) **Johnson WD and Fixcher DA :** Skeletal stabilization with a multiple external fixation device. *Clin Orhop*, 180:34-43, 1983
- 17) **Karlstrom G and Olerud S :** External fixation of severe open tibial fractures with the Hoffmann frame. *Clin Orthop*, 180:68-77, 1983.
- 18) **Karlstrom G and Olerud S :** Fractures of the tibial shaft; A critical evaluation of treatment alternatives, *Clin Orthop*, 105:82-115, 1974
- 19) **Karlstrom G and Olerud S :** Percutaneous Pin Fixation of Open Tibial Fractures. *J Bone joint Surg*, 57-A:915-924, 1975.
- 20) **Lange RH, Bach AW, Hansen ST and Johansen KH :** Open tibial fractures with associated vascular injuries : Prognosis for limb salvage. *J Trauma*, 25:203, 1985
- 21) **Nicoll EA :** Closed and open management of tibial fractures. *Clin Orthop*, 105:144, 1974.
- 22) **Perren SM :** Physical and biological aspect of fracture healing with special reference to internal fixation. *Clin Orthop*, 138:175-196, 1979.
- 23) **Sarmiento A :** A functional below the knee cast for tibial fractures. *J Bone Joint Surg*, 49-A:855-875, 1967.
- 24) **Sarmiento A :** A functional below the knee brace for tibial fractures. *J Bone Joint Surg*, 59-A:295-311, 1970
- 25) **Sarmiento A, Gersten LM, Sobol PA, Shankwiler JA and Vangsness CT :** Tibial shaft fractures treated with functional braces, Experience with 780 cases. *J Bone Joint Surg*, 71-B:602, 1989.
- 26) **Schmidt A and Rorabeck CH :** Fractures of the tibia treated by flexible external fixation. *Clin Orthop*, 250:81-104, 1990.
- 27) **Taylor JC :** Fractures : The Ilizarov method and result(Trauma applications of the Ilizarov Technique). *Ilizarov Method Courseses*, pp. 1-10, April 30-May 1, 1993.
- 28) **Tucker HL, Kendra JC and Kinnebrew TE :** Management of unstable open and closed tibial fractures using the Ilizarov method. *Clin Orthop*, 280:125-135, 1991.