

CASE REPORT : DEATH OF BIPOLAR HEMIARTHROPLASTY - MEETING PATIENT EXPECTATION

Mohammed Harris Anwarali Khan¹, Kunalan Ganthe¹, Sasidaran Ramalingam¹

¹Hospital Kuala Lumpur

Introduction: MR.C who is a 91 years old chinese man presented with chief complaint of expose right hip implant for 6 months duration. Patient has underlying ischaemic heart disease done bypass surgery. Patient underwent right bipolar hemiarthroplasty for right hip fracture one year prior. Post operatively patient is semidependent and requires assistance for ambulation. Patient was previously been staying in nursing home. However 3 months post operatively patient complaint of pain and discomfort over the right hip. Since then patient has been bedridden. He also noticed breakdown of wound and occasional discharge from right hip wound. Patient was treated with regular dressing. Upon examination patient was orientated to time, place and person. Right lower limb contracted, adducted with severe muscle wasting. The implant was exposed over right hip with purulent and foul smelling discharge. Radiograph showed dislocated right bipolar hemiarthroplasty.

Discussion: Family conferences was conducted and preceded with surgery. Patient underwent right resection arthroplasty. Patient was put on lateral position, surgical site was clean and draped in usual manner. Right hip wound was excised and debrided. Implant was not loosened intraoperatively. Proximal femur was resected at the level of proximal femur to ease removal of implant. After removal of bipolar hemiarthroplasty implant, cement was removed from right femur canal. Debridement was continue and wound was washed with copious amount of normal saline and diluted povidone. Wound close in layer and drain inserted. Post operatively patient is well and wound healed well..

Conclusion: In evolving orthopaedic surgical era now, the Girdlestone's resection is rarely indicated as a primary procedure. However, it retains a place in the arsenal of surgical hip techniques. It is a simple procedure giving a mobile, painless and stable hip, at the cost of a shortening. Choice of treatment can be made acceptable by proper explanation to the patient with realistic expectations.