

Neglected DDH in Older Children

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INTRODUCTION:

Late presentation of developmental dysplasia of the hip (DDH) poses difficult challenges in management. A one-stage surgical procedure has been widely used with the aim of achieving a painless mobile hip.

REPORT:

An 8-year-old girl presented with a painless limping gait since she started walking around 10 months old. On examination, the patient's right lower limb is 6cm shorter. The Trendelenberg test is positive. She has limited hip abduction and excessive hip internal and external rotation. A pelvic radiograph showed a dislocated right hip with acetabular index (AI) of 38 degree. She was diagnosed with neglected right DDH and underwent varus derotational osteotomy of the right femur, right femur shortening, capsulorrhaphy, and Chiari pelvic osteotomy. Post-operation, she was immobilized with hip spica for 6 weeks. On post-operative review at 6 months, the child walked with a short limb gait and had good hip range of motion. Pelvic radiograph showed reduced hip and bone union at osteotomy sites.



Figure 1: Pelvic radiograph at presentation



Figure 2 : post operation radiograph and at 6 months showed concentric hip.

CONCLUSION:

When adequate femur shortening with derotation is performed together with appropriate acetabular reconstruction and tight capsulorrhaphy, one-stage hip reconstruction for neglected DDH may result in an excellent outcome.

REFERENCES:

- 1) El-Tayeby, Journal of Children's Orthopaedics 2009; pg 11-20.
- 2) Papavasiliou, Journal of Orthopaedic Science 2005; pg 15-21.