MIS For Complex Pelvic Fracture: Enhancing PatientOutcomes ¹Mohd Hazimin Mohd Sharani; ¹Hadizie D; ¹Aizat Saat;²Kamarul Al Haqq Abdul Ghani

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INTRODUCTION:

Complex pelvic fracture defined as pelvic fracture with involvement of multi system injury and accompanied with hemodynamic instability¹. Mortality rate up to 42%². Options of management very challenging to prevent further morbidity and improving patient recovery. This case report we presenting the benefit of minimally invasive surgery(MIS) in the complex pelvic fracture.

REPORT:

A 22 years old lady, was hit by a car while riding a motorbike. Presented to casualty with GCS 15/15,complaint pain over abdomen and right hip. ATLS protocol activated. She was hemodynamically unstable, not responded to resuscitation. Fast scan noted free fluid. Emergency CT contrast performed noted her spleen shattered with liver laceration together with pelvic fracture.

Exploratory laparotomy and splenectomy performed by surgical team. Her pelvic temporarily stabilize by external fixator. She had blood loss that required multiple transfusion and divc regime. With the multidisciplinary team management and proper monitoring in ICU, she was able to be stabilized and transfer out to general ward.

Thorough preoperative preparation was done. She noted to have right transverse type acetabulum with sacral ala fracture Dennis type 2 as well as isolated left superior and inferior pubic rami fracture. There is no neurovascular deficit noted.

In view of she already had undergone major surgery that might cause her a life we decided for MIS for her.

Surgery went well uneventful with minimal blood loss that not required any transfusion with very small scar. We able to achieved satisfactory reduction. Postoperatively she able to sit with tolerable amount of pain and start to ambulate with wheelchair. She had no wound problem and was discharge home in the expected time.



Figure 1: Plain radiograph



Figure 2: CT Scan

CONCLUSION:

Minimally invasive surgical techniques have emerged as promising approaches for addressing these fractures, offering distinct advantages over traditional open procedures.

REFERENCES:

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2. Shuang Wu et al., Journal of Orthopaedic Surgery and Research 16, Article number: 350(2021)