Traumatic Posterior Hip Dislocation with Ipsilateral Subtrochanteric Femur Fracture and Acetabular Wall Fracture: A Case Report

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INTRODUCTION:

Traumatic posterior hip dislocation with ipsilateral subtrochanteric femur fracture and acetabular wall fracture is rare and serious injury that occurs mostly after high-energy trauma^{1,2}. The treatment of these injuries is a major challenge for orthopaedic surgeons; it can have devastating consequences if not treated properly².

REPORT:

A 53 years old, man who involved in motor vehicle accident and sustained injury over his right hip. He sustained ipsilateral right subtrochanteric femur fracture with posterior hip dislocation and comminuted acetabular wall fracture.

Managing such injuries is always a complex decision. The first challenge is to understand the exact pattern of injury to formulate a surgical plan. Utilizing a high-quality Computed Topography (CT) scan with 3D reconstruction proves invaluable in such cases. Subsequently, ensuring adequate reduction and stable fixation poses the next challenge. Given the posterior dislocation, the primary fracture fragments are typically located posteriorly.

Therefore, employing a posterior approach with the patient in the lateral position proves beneficial. In our case, following reduction of the head, fixation of the subtrochanteric fracture was performed without altering the patient's position. Patient underwent right long proximal femoral nail first then, recon plate for the right acetabular wall fracture, along with a spring plate.



Figure 1: Pelvis x-ray and 3D CT scan on initial injury





Figure 2: Pelvis x-ray post operation

CONCLUSION:

Traumatic posterior hip dislocation with ipsilateral subtrochanteric femur fracture and acetabular wall fracture is both uncommon and severe, often requiring surgical intervention. Consequently, thorough pre-operative planning is crucial for good anatomic reduction and fixation.

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