

A Typical Bisphosphonate Complication: A Case Report Of Atypical Fracture

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INTRODUCTION:

Atypical femur fractures (AFFs) are rare but significant complications associated with long-term bisphosphonate therapy, primarily used for osteoporosis management. These fractures typically occur in the femoral diaphysis with minimal or no trauma, characterized by a transverse fracture line. The pathophysiology involves impaired bone remodeling due to bisphosphonates, leading to stress fractures that may progress to complete fractures.

Identification and management of AFFs are crucial, as they can lead to severe morbidity.

REPORT:

A 57-year-old Malay woman presented to the emergency department following a fall that resulted in a closed fracture of the right proximal femur. Her medical history included rheumatoid arthritis, for which she was under the care of a rheumatologist and had been prescribed hydroxychloroquine. Additionally, she had been diagnosed with osteoporosis in 2017, leading to the initiation of bisphosphonate therapy.

Upon further evaluation, the patient reported experiencing resting thigh pain for the past two years, which had intensified over the last two weeks and ultimately precipitated her fall and subsequent hospitalization. A review of her radiographs indicated an atypical femoral fracture.

The patient underwent surgical intervention involving intramedullary nailing and experienced an uneventful postoperative recovery.

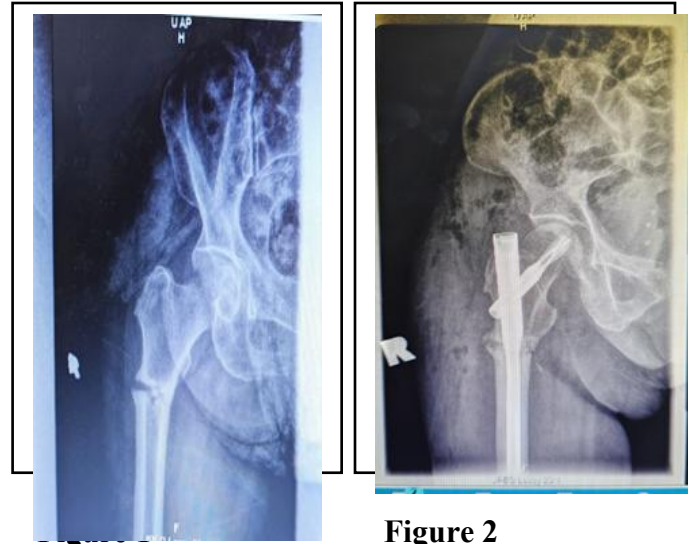


Figure 2

Figure 1 : Showing radiograph of atypical femur fracture.

Figure 2 : Showing post-fixation radiograph.

CONCLUSION:

A high index of suspicion for patients on long-term bisphosphonate therapy who report thigh pain is essential for facilitating early detection and enabling timely intervention.

REFERENCE:

1. Atypical femur fractures: current understanding and approach to management
Lianne Tile 1, Angela M Cheung