

Femoral reduction and fixation of femoral neck fracture in young people by direct anterior approach: a case report

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Abstract

Femoral neck fractures in young adults are uncommon and often the result of high-energy trauma. They are associated with higher incidences of femoral head osteonecrosis and nonunion. Multiple factors can play a significant role in preventing these devastating complications and contribute to a good outcome. While achieving an anatomic reduction and stable internal fixation are imperative, other treatment variables, such as time to surgery, the role of capsulotomy and the fixation methods remain debatable. Watson-Jones exposure is the recommended approach. Definitive fixation can be accomplished with three cannulated or noncannulated cancellous screws. But we want to demonstrate that direct anterior approach is a valid alternative to respect anatomy with a significative case report. A 18 years old boy, was taken in emergency room in an afternoon of february 2021. After a motorbike accident he reporter a femoral neck fracture , classifiable as 4° degree of Garden Classification. To respect his soft tissue, the fracture was immediatly recuced in operative room by anterior direct approach and than fixated with two cannulated screws. Partial weight bearing was conceded a few days after the operation. The clinical and radiological follow was performance every two months. After one year we can see a perfect healing and no signs of necrosis or arthritidis. . He returned after two months at every days activities and after si months to sport activities. We think than direct anterior approach is preferable in young people to to fully respect the anatomy. The most important thing is timing, immediate intervention is necessary to avoid the classica complications

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Biography

Dr. Giacomo Trivellin was born in Vicenza, Italy in the 1984. He was graduated in Medicine and Surgery at Trieste University and specialized in Orthopedics and Traumatology at Verona University in 2010. His activity is based most on trauma and hip

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