

OUTCOME OF PROXIMAL TIBIAL FRACTURES WITH AND WITHOUT PROPHYLACTIC PERCUTANEOUS FASCIOTOMY - A COMPARATIVE STUDY

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Abstract

Introduction:

Tibial plateau fractures are always a complex fracture in terms of reduction, various methods of fixations depending upon the fracture pattern and the soft tissue condition and finally the various complications due to the fractures itself and due to the surgery. The major complications includes delayed wound healing, infections, delayed rehabilitation and progression to osteoarthritis, whereas dreadful complications of these fractures are vascular injury and acute compartment syndrome. These complications are attributed to the increased intra compartmental pressure. Thus relieving the pressure will prevent and reduce these complications. In our study we compare the outcome of fracture fixation with or without the percutaneous fasciotomy.

Results:

In all the patients with percutaneous fasciotomy, we were able to relieve the compartmental pressure. We were able relieve pain significantly in all the patients within mean time of 6 hours after surgery. The requirements of analgesics was significantly less in this group compared to the group without PCF. Mean healing time of the wound was 10 days and there was no wound related complications in PCF group.

Conclusion:

Percutaneous fasciotomy can be routinely performed along with the fixation of proximal tibia fractures considering the significant reduction of the complications due to the fracture and the surgery itself, and also as a definitive management for the cases with impending compartment syndrome. In cases of impending compartment syndrome, percutaneous fasciotomy can arrest the progression of compartment syndrome and extensive fasciotomy was prevented. Thus the need for secondary wound procedure like flap cover, skin grafting, vacuum assisted closure was not required. Definitive management of fracture can be done in the same setting with less hospital stay with good cosmetic results.



Biography

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