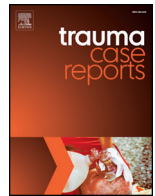


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Case report

Literature review and case report: Current concepts for concomitant intra and extracapsular fractures of neck of femur in elderly patients

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ABSTRACT

Though the incidence of concomitant ipsilateral intracapsular and extracapsular fracture neck of femur is still a rare presentation in day to day fracture hip admissions. Cases of simultaneous ipsilateral intra- and extra-capsular neck of femur fractures are forestalled with problems relating to diagnosing this injury as well as debate regarding optimal methods of fixation versus arthroplasty. We did a literature review to assess frequency of such fracture incidence, high-light methods of treatment applied, current practice for management as well as case report presentation.

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Introduction

In the field of orthopaedics, hip fractures are a common occurrence, be they are a result of an elderly falling in her home or a substantially younger individual crawling away from the scene of a bad road traffic accident. Hip fractures have, for a long time, been classified broadly into intracapsular and extracapsular subtypes, so it is a rarity when a patient is admitted to hospital presenting with a simultaneous intra and extracapsular type of hip fracture. We are presenting a challenging case with literature review of similar cases and their management.

There are only limited case reports of a simultaneous intra- and extra-capsular fracture of the hip throughout the literature. Most of cases reported were due either misplacement of DHS or 2ry subcapital fracture.

Most cases have occurred following low energy falls in elderly osteoporotic patients with the exception of a few cases following road traffic accidents [5,6].

Methods of fixation vary between cases. DHS fixation is the most common means of fixation adopted in multiple cases (seven cases), four of which used supplementary anti-rotation devices. One patient underwent fixation with a long stem hemiarthroplasty and Parham bands [6]. In our case total hip replacement with constrained cup was chosen by the treating surgeon.

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Case presentation

History

The patient in question was an 88-year-old lady of unpleasantly confused disposition (due to cognitive impairment) found on the floor of her nursing home after having tripped over a mat and thenceforth being unable to mobilize and complaining of pain in her right hip (Fig. 1).

Clinical examination

On clinical examination she had a tender right hip with a shortened and externally rotated leg.

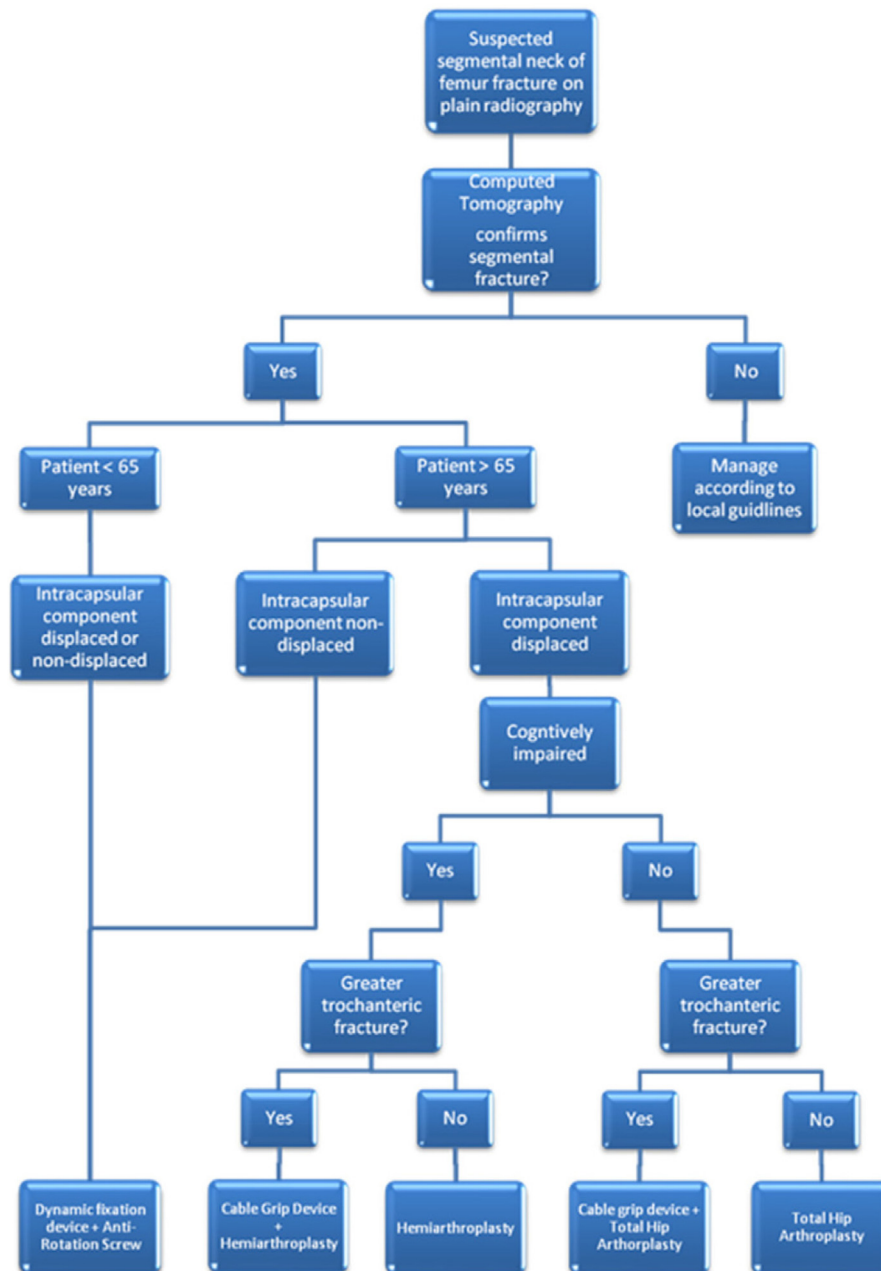


Fig. 1. Algorithm for the management of segmental neck of femur fractures.

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