Conclusions. Use of the pedicled latissimus dorsi flap in reconstructions provide sample well-vascularized soft tissue,minimizes the risk of infection and maximizes succesfful mobility salvage.For the same anatomic reasons of easy elevation and rotation ,the pedicle latissimus dorsi flap has been used successfully in extensive soft-tissue defects. The satisfactory data of such plastic recovery operations were clinically confirmed.
Key words: Latissimus dorsi flap,reconstruction,soft-tissue defect

117. TOTAL HIP ARTHROPLASTY REVISION AFTER A TRAUMATIC EVENT

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Background. Coxarthrosis is One of the most common disease of the hip joint in adults. It usually affects older people, the sex prevalence being almost equal for both genders. The peak incidence age is around 50 to 60 years old at the initial diagnosis. The total number of affected people if raising due to increasing life expectancy.
Case report. The patient, a 63 years old woman, accusing pain at the level of the left hip and functional impotence of the hip joint was admitted on 2nd of March at the Orthopaedics and Traumatology clinic. From the history of the patient we can find out that she undergone a total hip arthroplasty with an uncemented implant in 2006 and a cholecystectomy. The patient also suffers from type II arterial hypertension, treated with captopril, chronic venous insufficiency, varicose veins and bilateral gonarthrosis. The current state was given by a, traumatic fall which caused a traumatic aseptic mobilisation of the acetabular component, the femoral component being well fixed without any sings of mobilisation, condition which required a surgical intervention. The diagnosis was based off the CT, X-ray and negative ESR, CRP and fibrinogen, which confirmed the diagnosis. The operation took place on the 3rd of March and consisted of the revision of the total hip arthroplasty with the replacement of the acetabular component(uncemented cup) and the femoral head. Antibiotic prophylaxis with cefuroxime was also administered. The operation was successful, and the patient is now awaiting discharge.
Conclusions. Hip osteoarthritis is a medical condition that impairs people from walking causing pain and functional impotence. The standard treatment consists of total hip arthroplasty, which increases the quality of life and helps the patient walk again with less to no pain.
Key words: osteoarthritis, arthroplasty, coxarthrosis

118. PERIPROSTHETIC FEMORAL FRACTURES AFTER TOTAL HIP ARTHROPLASTY

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Introduction. Perioprosthetic Femoral fractures occur in approximately 0,1% to 6% of all patients who have a total hip arthroplasty (THA) . Periprosthetic femoral fractures are found

mostly in elderly women with osteopenia or in patients who have had loosening of the femoral component. Periprosthetic fractures around the femoral stem after THA represent a significant and growing technical challenge for othopaedic surgeons, requiring proficiency in both: THA and trauma care. Femoral fractures at the tip of a stem of a THA (Vancouver type B1 fractures) occur in 75% of all patients with periprosthetic fractures.

Aim of the study. To analyze the statistics of Orthopedics and Traumatology Hospital for the purpose of corelating them with the international statistics, and to demonstrate the incident rate of periprosthetic femoral fractures of all the revisions of hip arthroplasty that were performed in 2017-2019 years.

Materials and methods. The study group consisted of 23 cases of periprosthetic femoral fractures after hip arthroplasty treated between 2017 – 2019, 9 males and 14 females. Fractures were classified according to the Vancouver system and stratified as to treatment method.

Results. According to the study, out of 23 patients with periprosthetic femoral fracrures, 5 of them were Vancouver type B1 fracture, 4 - type B2, 6 patients type B3 and 6 of them type C fractures. According to the statistics, 9 patients with periprosthetic fractures have the age between 70-80 years, 4 of them have the age between 50-60 years and 3 more than 80 years.

Conclusions. The results of the analysis shows us that periprosthetic femoral fractures appear in 20% of all the revisions of hip arthroplasties. The periprosthetic femoral fractures have a higher incidence because of the growth of THA, that is why a surgeon that performs a THA should be prepared for a possible revision of hip arthroplasty.

Key words: periprosthetic femoral fractures, Vancouver's classification, total hip arthroplasty.

119. THE TWO-STAGE SURGICAL TREATMENT VS PRIMARY INTERNAL FIXATION OF PILON FRACTURES

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Introduction. Tibial pilon fractures are severe injuries to the distal articular surface of the tibia and, although described for more than a hundred years, remain to be a challenge for the orthopedic surgeon, since it involves obtaining an anatomical reduction of the articular surface and an adequate management of the soft tissues, the lesions of which the most often dictate treatment options. Various treatment methods are available, depending not only on the fracture type but mostly on the extent of the soft tissue injury. Most frequent procedure is a two-stage surgery: the initial closed reduction of the fracture via primary placement of an ankle joint-spanning external fixator, if possible in conjunction with open reduction and internal fixation of the fractured fibula followed by a secondary procedure after soft tissue recovery by open reduction and internal fixation of the tibial pilon. The new types of low-profile and locking plates available for internal fixation can allow the anatomical reconstruction of the fractured articular surface in a single stage.

Aim of the study. This study was performed to analyse the results of staged treatment protocol and the primary internal fixation for treating distal tibial fractures.

Materials and methods. A literature search was performed using PubMed. The combination of words "tibial pilon fractures staged treatment AND primary fixation" has been used for searching.