

THE RESULTS OF LOCKED INTRAMEDULAR NAILING OSTEOSYNTHESIS IN LONG TUBULAR BONE FRACTURES

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Introduction. The development of locked intramedullary osteosynthesis under the auspices of G. Kuntcher in several aspects has surpassed the evolution of extracortical osteosynthesis, especially in the treatment of diaphyseal fractures of the femur.

Purpose. The aim of this study: were the analysis of the results in healing of diaphyseal long tubular fractures by osteosynthesis with intramedullary locked nails in patients treated in IEM.

Material and methods. during the period of 2015-2020 years in the department of Orthopaedia of IEM there were examined and treated 314 patients with diaphyseal long tubular fractures (329 fractures on different levels) treated by intramedullary osteosynthesis using locked intramedullary nails. The group was consist of 203 (64,665%) male and 111 (35,35%) female patients. Average age was 40,4 years old (18-89 years old).



In 20 cases of femur fractures (12,6%) retrograde OS, in 130 (87,4%) - anterograde OS.

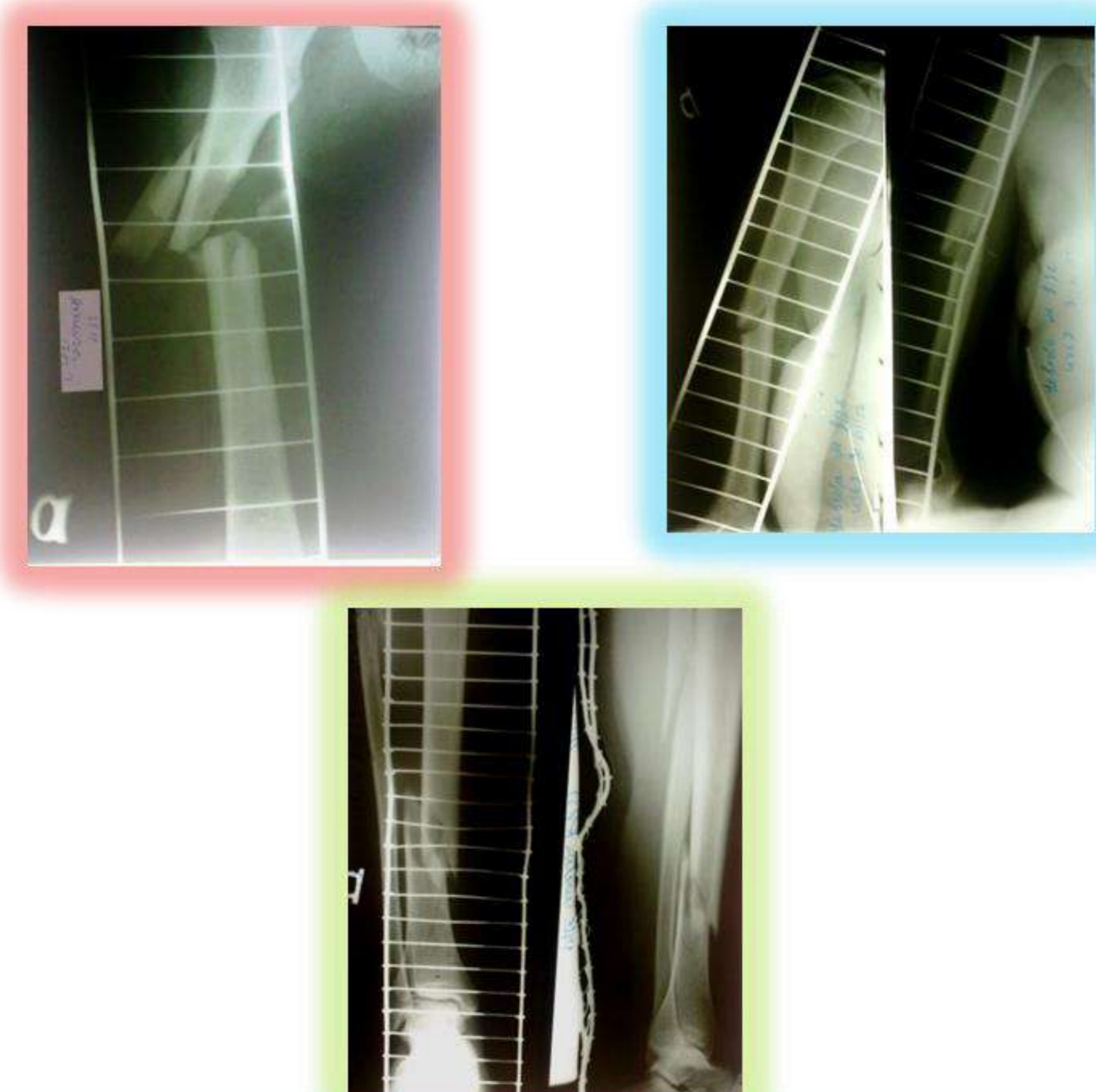
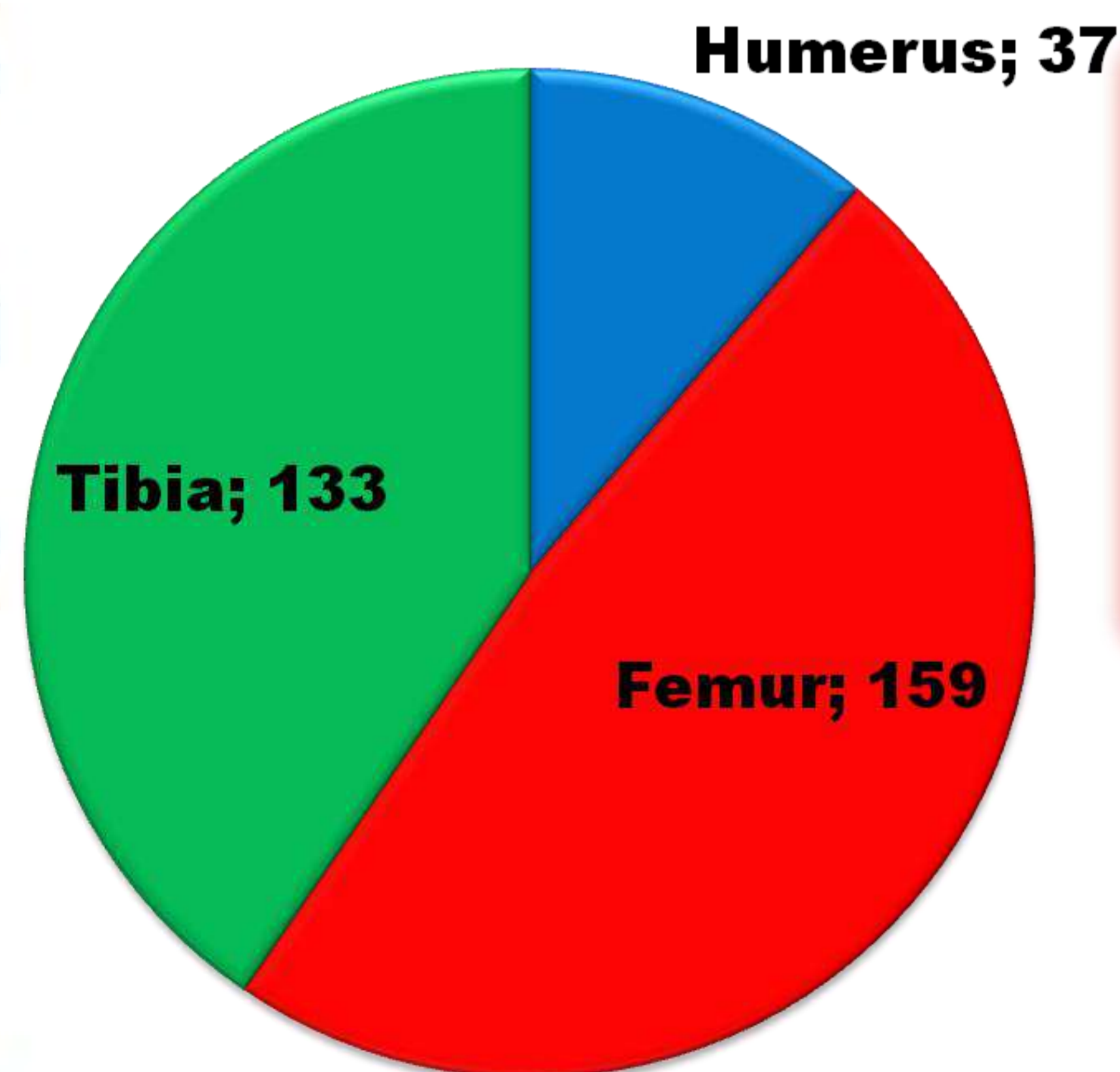
Tibia in 131 (100%) cases - anterograde.

Humerus in all cases (37, 11,3%) anterograde OS.

Results. according to functional scores LEFS and DASH the results are distributed as excellent in 294 cases (89,36%), good in 33 cases (10,03%), unsatisfactory in 2 cases (0,61%). As the complications there were inregistered: instability of proximal femoral screw -3 cases, damage of femoral nail -1case, damage of tibial nail -1 case, instability of humeral fixator - 1 case.

✓ Pacient „D”, ♂, 25 yo
 ✓ **Diagnosis:** Fractură închisă humerusului sting în 1/3 medie, cu deplasare fragmentelor AO 12A1

Pacient „C”, ♀, 51 yo.
Diagnosis: Fractură în 1/3 medie-distală a ambelor oase a gambei stîngi, cu deplasare fragmentelor, AO 42A1



Humerus - 37 (11,3%) cases; femur - 159 (48,3%) cases; tibie - 133 (40,4%) cases.

Conclusions. intramedullary nailing osteosynthesis represents a favorable method for healing the long tubular bone fractures. This method represents reduced surgical traumatism, less hemorrhage, early mobilization and low risk of perioperative complications.

Keywords. Diaphyseal fractures, long tubular bones, intramedullary nailing