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Results of Surgical Treatment of Acetabular Fractures Using Kocher-Langenbeck Approach

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Abstract

Aim of the study: To evaluate the results of acetabular fractures surgically treated using posterior Kocher-Langenbeck approach for internal fixation.

Methods: A series of 42 consecutive cases treated during a 4 year period was analysed. The mean age of the patients was 41 years. According to the Letournel classification 9 posterior wall fractures, 3 posterior column fractures, 11 transverse fractures, 4 posterior column and posterior wall fractures, 10 transverse and posterior wall fractures and 5 T-shaped fractures were noted.

Results: Quality of reduction based on Matta's criteria shows anatomical reduction in 25 cases (59.5%), imperfect in 11 cases (26.2%) and poor in 6 cases (14.3%). Neurological injury represented by peroneal nerve palsies occurred in 3 patients (7.1%). Acute infection was noted in one case (2.4%). Clinical results (for 38 patients) was excellent in 9 cases (23.7%), good in 23 cases (60.5%), fair in 4 cases (10.5%) and poor in 2 cases (5.3%). There was a statistically significant correlation between quality of reduction and clinical results with r = 0.68 (Pearson coefficient). Heterotopic ossifications were recorded in 14 cases and osteonecrosis of the femoral head was recorded in 2 cases.

Conclusions: Despite the relatively large number of complications, surgery treatment for acetabular fractures offers better results than conservative treatment, in which the complication rate is much higher.

Key words: acetabular fractures, Kocher-Langenbeck approach

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