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Open locked nailing using an expandable nail: An alternative approach

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Objective: The main objective is to evaluate various outcomes of open intra-medullary nailing using the fixation expanding nail at our institution.

Method: A retrospective study was performed using the hospital records. The mechanism of injury, the time between injury and surgery, blood transfusion requirements, blood loss, surgical times, time taken to weight bear (for the femoral/tibial fractures), time for commencement of upper limb use (for humeral fractures), complication rates and the average follow up times were documented. Fifty-seven long bone fractures in 57 patients were included in this study. Complete results including pre-operative X-rays were available for 27 patients. In 30 cases, the actual X-rays were not located but documentation by the treating surgeons was available.

Results: There were 44 acute femoral fractures, 6 acute tibial fractures, 3 acute humeral fractures, 2 humeral non-unions, 1 tibial non-union and 1 pathological femoral fracture. All patients achieved radiological union and the complication rates were deemed acceptable.

Conclusion: Open intra-medullary nailing using an expanding nail may be used for a variety of indications involving the humerus, tibia and femur.

Biography

Cary Fletcher completed his Doctorate in Orthopaedics in 2012 at the University of the West Indies. He is now an Orthopedic Surgeon at St. Ann's Bay Regional Hospital where he functions as the Academic Coordinator of the orthopedic service. As coordinator, he functions to moderate presentations at all levels of medical staff including residents, interns and student nurses and hence ensures continuing up to date medical education. He serves as one of the senior surgeons on the service in which the majority of cases involve orthopedic trauma. He is first author on two publications, fifth author on a third article and first author on a case report which has been accepted for publication.

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