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Sub-laminar wiring in spinal fractures – A viable alternative

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In Sri Lanka, toddy tapping is a common form industry in the coast line villages. Falls from palm trees of forty feet is a common occupational hazard. Spinal fractures are common in these patients. A retrospective analysis of a personal case series of the two authors was undertaken. A total of 37 pedicle screw fixations and 58 sub laminar wirings were done during a period of five years from 2004-2009. Follow up time was 6 months to 4 years (mean 3 years). Of the 58 sub laminar wirings, 41 were for lumbar fractures and 17 for thoracic fractures. Thirty two of the 58 sub laminar wirings were for injury due to falls from scaffoldings. Twenty one were toddy tappers who fell off the coconut palms. Five of the 37 pedicle screw fixations were done for thoracic fractures and 32 were done for lumbar fractures. Fourteen patients had falls from scaffoldings. Thirteen posterior fusions of the cervical spine were done. Seven of these were caused by tree climbing accidents. Three patients with sub-laminar wiring developed superficial wound infections while two had to have their metal work taken out due to deep infection. One thoracic sub laminar wiring patient had a CSF leak and two patients with lumbar pedicle screw fixation had cerebro-spinal fluid (CSF) leaks. Three patients with pedicle screw fixations to the lumbar spine had metal work failure due to non-union. One patient with pedicle screws had a re-fracture while three patients with sub laminar wiring of the thoracic spine had pneumothoraxes. Sub laminar wiring is a cheap stable method of fixation for traumatic spines which can be used in relatively under- equipped centers as well.

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Retrograde femoral nailing: Our experience

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Introduction: Retrograde femoral nail is a technique that has recently been used with increasing frequency for the management of complex femoral shaft fractures.

Purpose: The aim of this study was to investigate in a retrospective analysis the results of retrograde nailing in femoral shaft fractures with multiple other injuries.

Methodology: Retrograde femoral nailing was used from 2002 until 2012 in Dammam Medical Complex for the treatment of complex femoral shaft fractures in 217 patients. The preferred entry portal, the inter-condylar notch, can be reached quickly and effectively by a variety of methods. The mean age of patients was 43.2 years (range 18:65). Patients were followed up till fracture healing.

Result: Bony healing occurred in shaft fractures in 15.5 weeks on an average. Post-operative complications requiring re-intervention were seen in 6/48 (12.5%) fractures. Infection in 1 case (0.015) & anterior knee pain in 2 cases (0.03).

Conclusion: Our experience in DMC revealed that retrograde locked intramedullary nailing represents a reliable fixation method for complex femoral shaft fractures. Retrograde inserted nails offer a valuable alternative, especially when the proximal femoral approach is obstructed in poly-trauma patients. Comminuted fracture shaft with big butterfly fragment and metaphysical fractures better to be fixed by plates for more stability.

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