

August 2010 Case Study: Hip Arthrodesis for Severe Avascular Necrosis

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DIAGNOSIS: Avascular necrosis of left femoral head following left subcapital femoral neck fracture.

PROCEDURE: Left hip arthrodesis utilizing Cobra plate

INTERVAL HISTORY: The patient is a 19-year-old female who is very well known to this orthopedic clinic with global developmental delay/encephalocele. She sustained a fall approximately 10 months ago where she sustained a left femoral neck fracture which was initially treated with open reduction and internal fixation. She developed avascular necrosis of the femoral head post-operatively and had a significant decline in her ability to ambulate. A CT scan showed significant collapse and the screw fixating the fracture was nearly going into the joint space. She therefore underwent a hip arthrodesis/fusion and is now 2 months post-op from this procedure. She is here today for a scheduled post-operative visit and has done well. She does not have any specific complaints of pain although she is nonverbal and it has been difficult in the past for her to document pain. She was last seen here in our clinic 6 weeks ago. She has had no fevers and no recent illness. Her parents deny any recent trauma, fall, or injury.



PHYSICAL EXAMINATION: On examination, the patient appears well. She is in no acute distress. She is intermittently interactive but remains nonverbal (global developmental delay). Easily distracted. Examination of the left lower extremity reveals a well-healed long lateral incision clean, dry, and intact. No evidence of infection. No surrounding erythema. No prominence of hardware. Hip remained in approximately 20 degrees of flexion. She is able to flex approximately to 50 or 60 degrees. She is able to ambulate although she does so with a significant Trendelenburg component with significant weakness of her hip abductors. She tends to keep the left foot externally rotated. Neurologic examination is at baseline. She has gained approximately 20 pounds secondary to prolonged use of steroid medication and prolonged immobility.

RADIOGRAPHS: AP and lateral x-rays of the pelvis taken today demonstrates no evidence of hardware complication or hardware failure.

IMPRESSION AND PLAN: The patient is a 19-year-old female who is now 2 months status post left hip arthrodesis utilizing a cobra plate. She is doing well. She will continue with physical and occupational therapy 2 times/week for the next 6-8 weeks and we will see her for a follow up visit and new x-rays in approximately 2 months.

