

BILATERAL OSTEONECROSIS OF THE HUMERAL HEAD AND FEMORAL HEAD – A CASE REPORT

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INTRODUCTION

KNOWN AS THE AVASCULAR NECROSIS OR ASEPTIC NECROSIS OSTEONECROSIS OF THE HUMERAL HEAD REPRESENTS THE SECOND LOCALISATION IN TERMS OF FREQUENCY AFTER FEMORAL HEAD OSTEONECROSIS. IT OCCURS OFTEN BETWEEN 20 AND 50 YEARS AGE AND IS TWO TIMES MORE FREQUENT AT MEN. EXCEPT POSTTRAUMATIC OSTEONECROSIS THE MOST COMMON CAUSES ARE REPRESENTED BY CORTISONE THERAPY (HIGH DOSE), EXCESS CONSUMPTION OF ALCOHOL, OFTEN ASSOCIATED WITH EXCESSIVE SMOKING, HEMOGLOBINOPATHIES (SICKLE CELLS ANEMIA), DYSBARISM, GAUCHER DISEASE, CUSHING SYNDROME ETC.

MATERIAL AND METHOD

THE PATIENT INCLUDED IN THIS STUDY IS 42 YEARS OLD AND RECEIVED TREATMENT WITH PREDNISONE ABOUT 12 YEARS AGO FOR AN ECZEMA, WITH MIDDLE DOSE. THE DISEASE STARTED AFTER ABOUT 1 YEAR AND FINALLY ENOUGH TO IMPLANT A TOTAL PROSTHESIS HYBRID, WITH CEMENTED STEM TO THE RIGHT HIP, ABOUT 9 YEARS AGO, IN OUR DEPARTMENT. WE PERFORMED 6-7 MONTHS AGO A CEMENTLESS TOTAL HIP REPLACEMENT TO THE LEFT SIDE, FOR A STAGE IV FEMORAL HEAD NECROSIS (FICAT), WITH SECONDARY OSTEOARTHRITIS. ON THAT OCCASION IS FOUND AND THE PRESENCE OF BILATERAL NECROSIS OF THE HUMERAL HEAD.

RESULTS

CURRENTLY THE PATIENT IS RECOVERY AFTER LAST SURGERY AND IT HAS TWO FUNCTIONAL HIP PROSTHESIS WITH GOOD HIP MOBILITY AND WALKING WITHOUT PAIN. HE ACCUSED BUT A MARKED FUNCTIONAL EMBARRASSMENT TO BOTH SHOULDERS AND HAS A RELATIVELY IMPORTANT LIMITATION OF MOVEMENTS BILATERALLY. RADIOGRAPHIC IMAGES HIGHLIGHT LESIONS IN BOTH ADVANCED OSTEONECROSIS OF THE HUMERAL HEAD. RECENT ANALYZES SHOW THE EXISTENCE OF ASSOCIATED RISK FACTORS SUCH AS HYPERURICEMIA AND ELEVATED TRANSAMINASES, AMID HEAVY DRINKING.

CONCLUSIONS

AS SUGGESTED BY SOME STUDIES HUMERAL HEAD NECROSIS AND AVASCULAR NECROSIS IN SPECIAL CASES WITH MULTIPLE LOCATIONS IS NOT DUE ONLY CORTICOSTEROID THERAPY OR ALCOHOL, HAVING RATHER A MULTIFACTORIAL

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ETIOLOGY. THERAPY IS DIFICULT IN THE FINAL STAGES WHEN YOU HAVE TO CHOOSE BETWEEN CONSERVATIVE TREATMENT, HEMIARTHROPLASTY OR TOTAL SHOULDER PROSTHESIS.

KEYWORDS: OSTEONECROSIS, CORTICOSTEROID THERAPY, ARTHROPLASTY.