

RESULTS IN THE SURGICAL TREATMENT OF COMPLEX TIBIAL PLATEAU FRACTURES - 10-YEAR RETROSPECTIVE STUDY

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INTRODUCTION. COMPLEX TIBIAL PLATEAU FRACTURES ARE EXTREMELY DIFFICULT TO TREAT BECAUSE OF THE INTRAARTICULAR INVOLVEMENT OF THE KNEE JOINT AND ALSO DUE TO EXTENSION OF THE FRACTURE SITE AT THE METAPHYSEAL AND DIAPHYSEAL LEVEL.

MATERIAL AND METHODS. THIS STUDY AIMS TO EVALUATE THE VARIOUS SURGICAL TREATMENT METHODS APPLIED IN THE 2ND DEPARTMENT OF ORTHOPAEDICS AND TRAUMATOLOGY OVER A PERIOD OF 10 YEARS (2004-2014). IN THIS PERIOD THERE WERE REGISTERED 56 PATIENTS WITH COMPLEX TIBIAL PLATEAU FRACTURES. IN ALL PATIENTS THE CLASSIFICATION WAS MADE ACCORDING TO SHATZKER AND AO / OTA SYSTEM. ONLY PATIENTS WITH SHATZKER V AND VI FRACTURES WERE SELECTED FOR EVALUATION IN THE PRESENT STUDY.

RESULTS. FUNCTIONAL EVALUATION WAS DONE USING THE KNEE SOCIETY SCORE (KSS). THE RESULTS WERE EXCELLENT IN 83% OF CASES. DOUBLE PLATING TECHNIQUE AND FIXATION WITH LOCKING LCP PLATE PROVED TO ASSURE THE BEST STABILITY AT THE FRACTURE SITE AND THE BEST FUNCTIONAL RESULTS.

CONCLUSIONS. COMPLEX TIBIAL PLATEAU FRACTURES OFTEN RESULT FROM SEVERE TRAUMA. IN ADDITION TO THE REDUCTION AND STABILIZATION OF THE FRACTURE, VERY IMPORTANT IS THE MANAGEMENT OF SOFT TISSUE IN THESE PATIENTS. AMONG THE METHODS OF INTERNAL FIXATION LCP LOCKING PLATE

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AND DOUBLE PLATING TECHNIQUE PROVIDE THE BEST STABILITY AT THE FRACTURE SITE.

KEYWORDS: TIBIAL PLATEAU FRACTURE, FUNCTIONAL ASSESSMENT, LOCKING PLATE, DOUBLE PLATING