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Surgical Treatment of Malunited or Nonunited Talus Fractures

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Summary:
As to posttraumatic talar deformities, surgical treatment can lead to a favorable outcome. According to concrete status of malunions or nonunions after displaced talar fractures, apply suitable surgical treatment to obtain satisfactory outcome.

Introduction:
To explore the operative methods of malunited or nonunited talus fractures.

Methods:
22 patients of malunions or nonunions after displaced talar fractures were treated from January 2000 to January 2008. There were 17 males and 5 females with an average age of 33.5 years (ranged from 15 to 52 years). According to classification of posttraumatic talar deformities (Zwipp 2003), They included 10 cases of type I (malunion and/or joint displacement), 8 cases of type II (nonunion with joint displacement), 4 cases of type III(type I / II with partial AVN). The surgical treatments included open reduction, osteotomy, correction and internal fixation with plate, screw or K-wire, or the ankle, subtalar arthrodesis.

Results:
17 patients were followed up for 14 months in average (ranged from 12 to 24 months). No wound healing problems or infections were seen. Solid union was obtained without redislocation in all patients. The mean time of bone union was 14 weeks (ranged from 12 to 18 weeks). The mean time of completely weight loading was 14 weeks (ranged from 12 to 18 weeks). The mean AOFAS Ankle and Hindfoot score increased from 35.4 (ranged from 28 to 41) to 86.6 (ranged from 78 to 98).

Conclusion:
As to posttraumatic talar deformities, surgical treatment can lead to a favorable outcome. According to concrete status of malunions or nonunions after displaced talar fractures, apply suitable surgical treatment to obtain satisfactory outcome.