A Study of Enders Nailing in Paediatric Long Bone Fractures

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1. Introduction

A study of enders nailing in paediatric long bone fractures in terms of fracture union, complications and postoperative mobilisation. Routine treatment options for long bone fractures in children are Cast immobilization, ORIF, External fixator and Intramedullary nailing

2. Materials and Methods

This study includes 33 patients of which 24 males and 9 females with fractures of either femur or tibia shaft operated with enders nailing from November 2006 to august 2014.All fractures were operated within the first 2 days, and Non weight bearing for 6 weeks and Early mobilisation done in all cases.Patient discharged from 2^{nd} to 6^{th} POD. Nailremoval done from 4 months to 1 year

Operative technique for femur enders nailing

Done Under spinal anaesthesia/GA on Fracture table With Traction applied Then Reduction confirmed under C arm and Entry point taken as follows 2cm to 3cm proximal to the distal epiphyseal plate, postero-medially and posterolaterally

Operative technique for tibia enders nailing

Done Under spinal anaesthesia / GA. Entry Few cm distal to the epiphyseal plate Antero-lateral and antero-medial aspects and Nail inserted under C arm control

3. Discussion And Results

Results were evaluated using Flynn et al. criteria

Excellent results were achieved in 24 patients satisfactory results in 9 and poor results in none.All fractures united within 3 months.

Limb length discrepancy <1cm was seen in 1 patient and no angular deformities and there was migration of the nail in 2 and mild soft tissue infection in 4 patients.

Disadvantages of spica with or without traction are limb length discrepancy angulation, rotation deformity, physiological and economical complications

Complications of external fixator are pin tract infection, loss of knee range of motion, delayed union, non-union and refracture after fixator removal.

Complications of ante-grade nailing areAVN of femoral head, trochanteric epiphysiodesis and Coxavalga

4. Conclusion

Thus Ender's nailing still appears to be simple, easy and effective method for paediatric long bone fractures, is a Load sharing internal splint, Early mobilization possible Maintains length and alignment without endangering blood supply to epiphysis with minimal complications and cost.

References

- P.Merianos, .Cambouridis, P.Smyrnis The treatment of 143 tibialshaftrfatures by ender's nailing and early weight bearing: 1985 British Editoirial society of bone and joint surgery 0301-620X 85 4090: 570-580
- [2] Gamal El-Adl, Mohamed F.Mostafa, Mohamed A.Khalil et al. Titanium elastic nail fixation for paediatric femoral and tibial fractures :2009 ActaorthopaedicabelgicaVol 75 :512 -520
- [3] Dr.S.K.Venkatesh Gupta, Dr.S.SirishAditya (IOSR-JDMA) ISSN:2279 -0853, p-ISSN 2279 - 0861,volume 5 Issue2(Mar - Apr 2013) : 28-31
- [4] R.Hussain, M.Umer, M.Umar Treatment of tibialdisphyseal fractures with closed flexible intramedullary Ender's nails: 39 fractures followed for a period of two to seven years : Journal of pakisthanmedical association May – 2001
- [5] P.Singh, V.Sharma, H.Singh et al: Treatment of fractures of the shaft of femur in children by Ender's nails- A prospective study : The internet journal of orthopaedic surgery 2008 volume 11 number 1
- [6] P.Gonalez-Herranz, J.Burgos-flores, J.m.Rapariz et al Intramedullary nailing of the femur in children : 1995 British editorial society of bone and joint surgery : 262-266
- [7] J.N.Ligier. I.P.Metaizeau, J.Prevot et al Elastic stable intramedullary nailing of femoral shaft fractures in children : 1988 British editorial society of bone and joint surgery0301-620X/88/1015:74-77
- [8] M.Barry, J.M.H.Paterson Flexible intramedullry nails for fractures in children : 2004 British editorial society of bone and joint surgery doi:10,1302/0301-620X,86B715273 : 947-953