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| 언어구분 | KOR | 논문구분 | 원저/구연 | 논문분야 | 골절 |
| 논문제목 | 활강 압박 고 나사로 수술한 대퇴골 전자부 골절에서 금속 내 고정물 제거 후 발생한 대퇴 경부 골절 | | | | |
| 영문제목 | Femoral Neck Fracture After Removal of the Compression Hip Screw | | | | |
| 발 표 자 | 권지은 | 책임저자 | 윤강섭 | | |
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서론 : The purpose of this study is to evaluate the incidence of femoral neck fracture after removal of the compression hip screw (CHS) without trauma, and to determine the risk factors for this type of fracture.

재료 및 방법 : The purpose of this study is to evaluate the incidence of femoral neck fracture after removal of the compression hip screw (CHS) without trauma, and to determine the risk factors for this type of fracture.

결과 : Five (9.1%) femoral neck fractures occurred within 1 month after CHS removal. All patients were women and trauma did not cause the fracture. Two cases of displaced fractures were treated with bipolar hemiarthroplasty. Three fractures were incomplete and one of them was treated with multiple pins. One of the remaining two incomplete fractures was successfully treated with non-weight bearing therapy, while one had bipolar hemiarthroplasty because of fracture displacement during the initial conservative treatment. When comparing two groups, the fracture group had significantly low mean BMD of the femur, narrow mean diameter of the femoral neck on both AP and lateral radiographs, and short mean inferior thread-to-cortex distance on AP radiographs.

결론 : The incidence of femoral neck fracture after CHS removal was relatively high (9.1%), therefore CHS should not be removed unless for good reason, and attention should be paid to risk patients with low BMD, narrow femoral neck diameter, and short inferior thread-to-cortex distance. After CHS removal in inevitable cases, strict partial weight bearing should be addressed until the bone has consolidated and bone substitution materials may be considered to fill the bone defect to prevent femoral neck fractures.

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