Comment on Shetty et al.: Ipsilateral hip and femoral shaft fractures treated with intramedullary nails

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We read with interest the article “Ipsilateral hip and femoral shaft fractures treated with intramedullary nails” by M. Shantharam Shetty, M. Ajith Kumar, Sandeep S. Ireshanavar, and Sudhakar. The topic was nicely described [1]. The treatment of ipsilateral fracture poses a challenging task for planning surgery with intra-operative and post-operative complications including, most devastating of all, non-union of fractured neck of femur. We suggest that if ipsilateral fracture of neck of femur is suspected in a fractured shaft of femur, in addition to lateral views of the hip, CT scan of the hip should be performed [2]. Moreover, treatment is determined by whether the fractured neck of femur is displaced or undisplaced. In our experience, if the fractured of neck of femur is displaced after insertion of the reconstruction nail with distal interlocking for the fracture of shaft of femur, the femoral neck fracture is reduced by applying traction. However, instead of acting at neck of femur, the traction acts at fracture of shaft of femur and distracts it; thus, it is very difficult to reduce femoral neck accurately. Therefore we prefer a retrograde femoral nail followed by multiple cannulated cancellous screws for displaced fracture

neck of femur [3]. If in undisplaced fracture of neck of femur reconstruction nails are planned, the femoral canal should be overreamed 1.5–2 mm larger than the nail to allow adjustment of anteversion angle [4]. We feel this article would have been more informative if these points had been considered in planning of fixation in these complex fractures.

References

1. Shetty MS, Ajith Kumar M, Ireshanavar SS, Sudhakar (2007) Ipsilateral hip and femoral shaft fractures treated with intramedullary nails. *Int Orthop* 31(1):77–81 DOI 10.1007/s00264-006-0143-6
2. Yang KH, Han DY, Park HW, Kang HJ, Park JH (1998) Fracture of the ipsilateral neck of the femur in shaft nailing: the role of CT in diagnosis. *J Bone Joint Surg Br* 80-B:673–678
3. Bucholz RW, Heckman JD (2001) Rockwood and Green’s fractures in adults, vol 2, 5th edn. Lippincott Williams & Wilkins, London, pp 1714–1715
4. Bose W, Corces A et al (1992) A preliminary experience with the Russell Taylor reconstruction nail for complex femoral fractures. *Orthop Trauma* 32:71–76

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