CASE REPORT

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Hip dislocations associated with ipsilateral femoral neck fracture

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Abstract Two cases of subcapital fracture associated with hip dislocation, treated with primary uncemented Total Hip Replacement are presented.

Résumé. La luxation traumatique de la hanche associée à une fracture cervicale du même fémur est rare. Dans le présent rapport nous décrivons deux cas diagnostiqués et traités simultanément. L'un correspond à une luxation obturatrice, l'autre à une variété postérieure. Les blessés ont été traités par arthroplastie totale non cimentée de la hanche.

Introduction

During the last years, traumatic injuries of the hip joint have significantly increased in number and complexity. However, the combination of a dislocation of the hip and a fractured neck of the femur is a rare injury, with a few reports in the literature.

Case reports**Case 1**

A 48 year old male patient presented with multiple injuries after an aviation accident. He sustained facial fractures, multiple rib fractures with a clavicular fracture and a haemothorax, and an obturator hip dislocation with an associated subcapital fracture (Fig. 1). A CT scan showed an indentation lesion of the femoral head (ASIF C2) (Fig. 2). At operation the hip was approached antero-laterally and the femoral head was found to be embedded in the obturator notch. An uncemented total hip arthroplasty was performed, from which he made an unremarkable recovery and was able to return to work in civil aviation 8 months later.

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Fig. 1 Case no. 1. X-ray showing obturator hip dislocation with ipsilateral femoral subcapital fracture

Fig. 2 Case no. 1. CT showing obturator hip dislocation and indentation of the femoral head

Fig. 3 *Case no. 2.* Posterior dislocation of the hip with an associated subcapital fracture

Case 2

A 50 year old male patient was admitted after being struck by a falling tree. There was clinical and radiological evidence of a posterior dislocation of the hip with an associated subcapital fracture (Fig. 3). After failure of closed reduction, the hip was approached posteriorly and an uncemented total hip replacement performed. He made an unremarkable recovery.

Discussion

The association between hip dislocation and ipsilateral subcapital fracture is rare, and the dislocation is usually

posterior [1–6]. If the associated dislocation is anterior or obturator there is usually marked displacement of the fracture [7–9]. This combination of injuries may be treated by total hip replacement.

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