Safe release of gluteus maximus tendon in Kocher–Langenbeck approach for acetabular fracture reconstruction

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Release of the gluteus maximus tendinous femoral insertion in the Kocher–Langenbeck approach for acetabular fracture reconstruction allows retraction of the posterior flap without undue tension to the sciatic nerve. A safe technique of releasing the gluteus maximus tendon and protecting the first perforating branch of the profunda femoris artery is to perform soft tissue expansion by advancing a Cobb retractor bluntly between these structures, separating the muscle from the artery (Fig 1). The insertion is released using diathermy 1.5cm from the bone while maintaining the Cobb retractor in place, thereby protecting the artery (Fig 2).

Figure 1 A Cobb retractor is advanced between the gluteus maximus insertion and the first perforating branch of the profunda femoris artery

Figure 2 The gluteus maximus tendon is released using diathermy and maintaining the Cobb retractor in place to protect the first perforator