

CASE REPORT

Medical Education Series

Proximal Humerus Fracture

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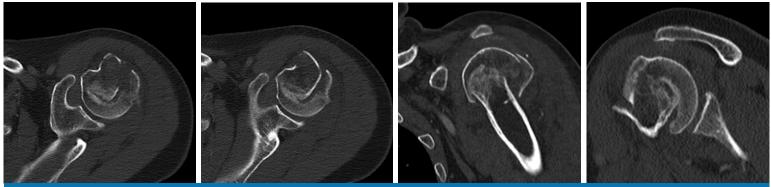
CERAMENT[®] BONE VOID FILLER

PATIENT HISTORY AND DIAGNOSIS

A 60 year old female presented with a three part proximal humerus fracture after slipping on an icy road.



Pre Op



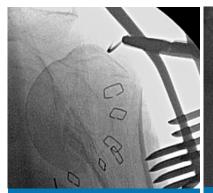
CT scan: Impaction at the fracture site



3 part proximal humerus fracture

TREATMENT PLAN

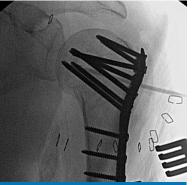
- Fracture reduction which results in significant bone void at the fracture site. This can lead to secondary loss of fixation and fracture settling if the void is not filled.
- Unfortunately, once most fractures are reduced access to the bone void becomes limited.
- Access to the central portion of the bone void was obtained using an 11 gauge drillable cannula to inject 10mL of CERAMENT.



Intra-Op



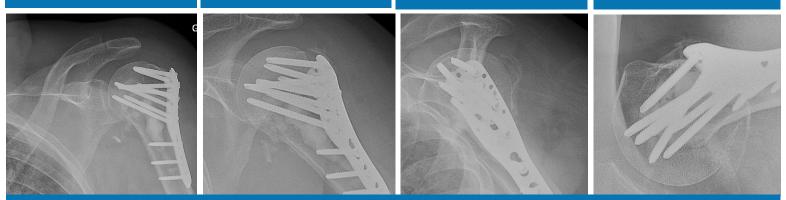
Intra-Op: Shows insertion of 11 gauge cannula through a screw hole in the plate and into the central void



Intra-Op



Immediate Post-Op: Shows where CERAMENT has been injected



PostOp: 7 weeks



PostOp: 3 months

OUTCOME

CERAMENT's radio visibility and flowability provided excellent fill throughout the void. This provided the option for minimally invasive fill of a bone defect that is not possible with traditional bone grafts.

At 3 months post-op, resorption and remodeling of CERAMENT into bone is apparent. The fracture is healed and the patient has excellent painfree use and function of arm.



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