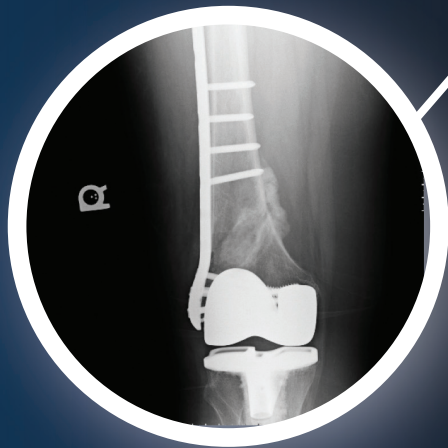


Medical Education Series

Open Reduction & Internal Fixation of Supracondylar Femur Fracture

38 Month Follow-Up

Dante A. Marra, MD



CERAMENT®

BONE VOID FILLER

SUPRACONDYLAR FEMUR FRACTURE

DIAGNOSIS

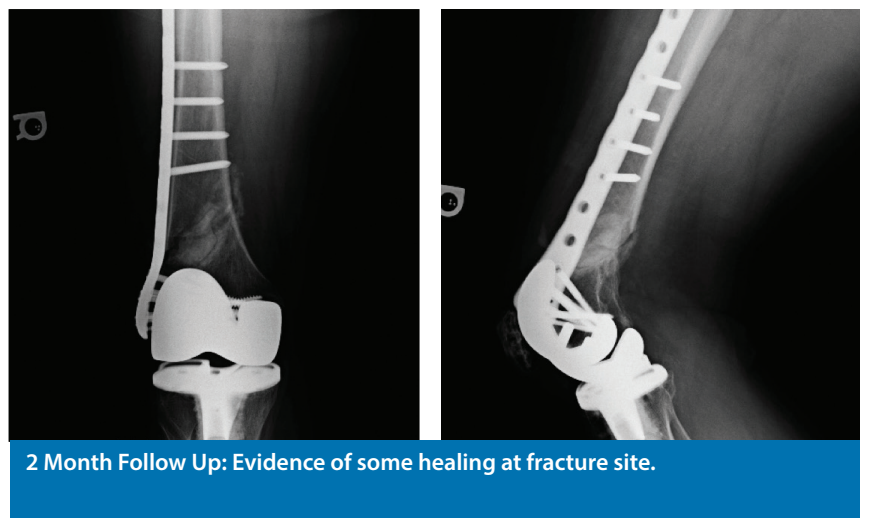
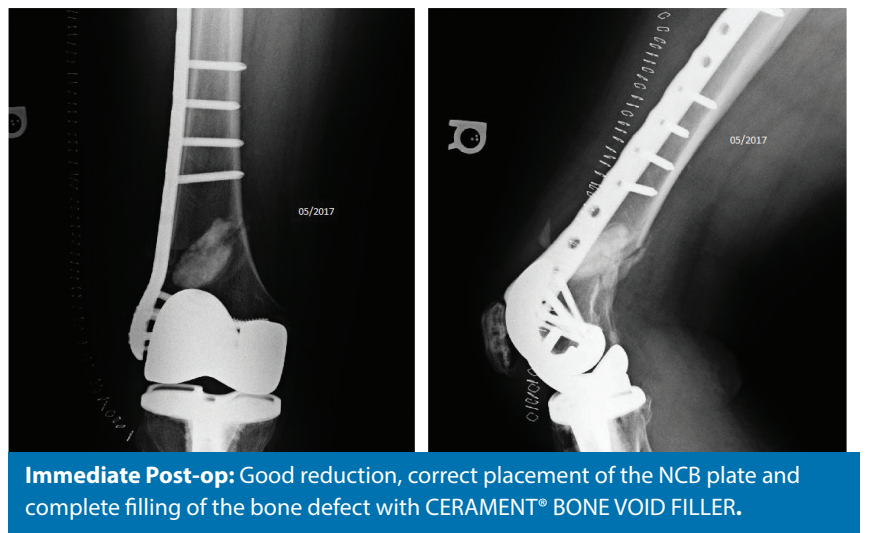
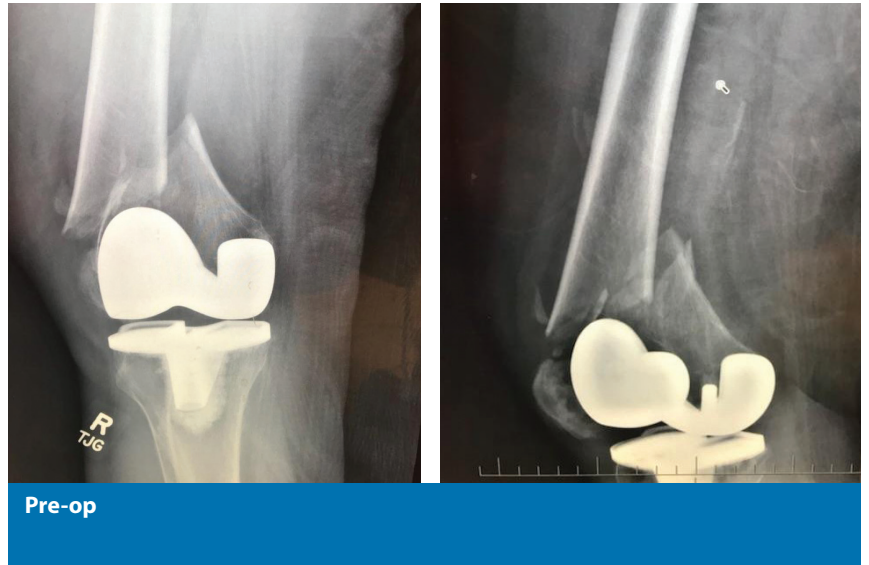
- Right periprosthetic supracondylar femur fracture above total knee arthroplasty (Lewis and Rorabeck Type II).

SURGICAL PLAN

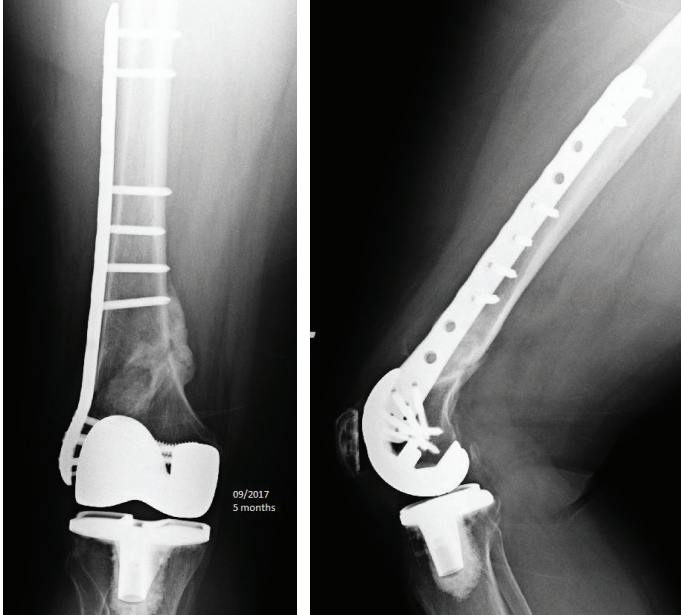
- Open reduction and internal fixation using a Non-Contact Bridging (NCB) plate (Zimmer Biomet; Warsaw, IN) and injection of CERAMENT® BONE VOID FILLER into the fracture gap.

OUTCOME

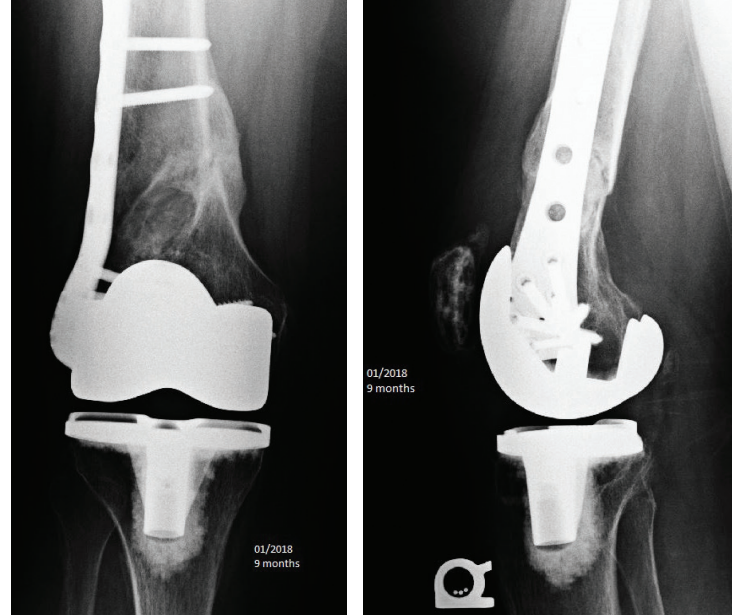
- Immediately post-op, good position of hardware and no evidence of complications.
- After 2 months, the patient has good range of motion, is neurovascularly grossly intact, has no calf tenderness and is negative for Homan's.
- At 5 months post-op the patient continues to increase activities and is being encouraged to exercise.
- 9 month follow up shows that the fracture is healed with strong callus formation.
- CERAMENT® BONE VOID FILLER has completely remodeled into bone.



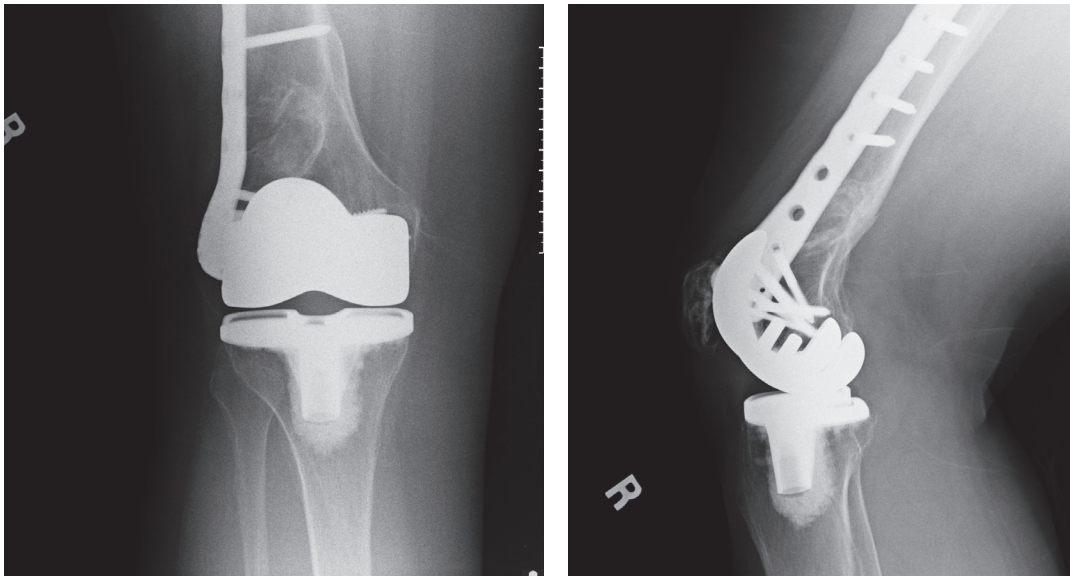
FOLLOW UP RADIOGRAPHS



5 Month Follow Up: CERAMENT® has begun remodeling into bone.



9 Month Follow Up: The void is now filled with new trabeculated bone.



38 Month Follow Up: Evidence of bone remodeling and complete healing at fracture site where CERAMENT was injected.



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