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PR-01540-01 en US 12-2024

CERAMENT[®]

BONE VOID FILLER

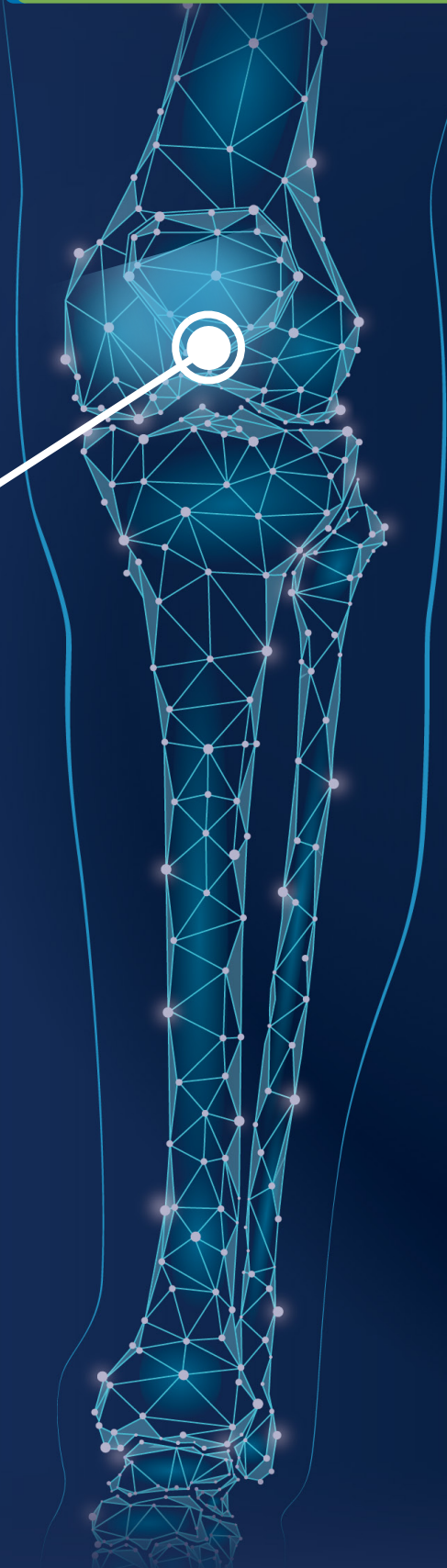
CASE REPORT

Medical Education Series

Femoral Condyle Fracture with Intra-Articular Extension

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Level 1 Trauma Center
Miami, Florida*



FEMORAL CONDYLE FRACTURE WITH INTRA-ARTICULAR EXTENSION

PATIENT HISTORY

A 54 year old male had a fall from standing and sustained a right medial femoral condyle fracture with intra-articular extension with bone loss.

DIAGNOSIS

Closed right medial femoral condyle fracture with intra-articular extension.

CO-MORBIDITIES

COPD, chronic alcohol abuse, hypertension, and a daily tobacco smoker.

TREATMENT

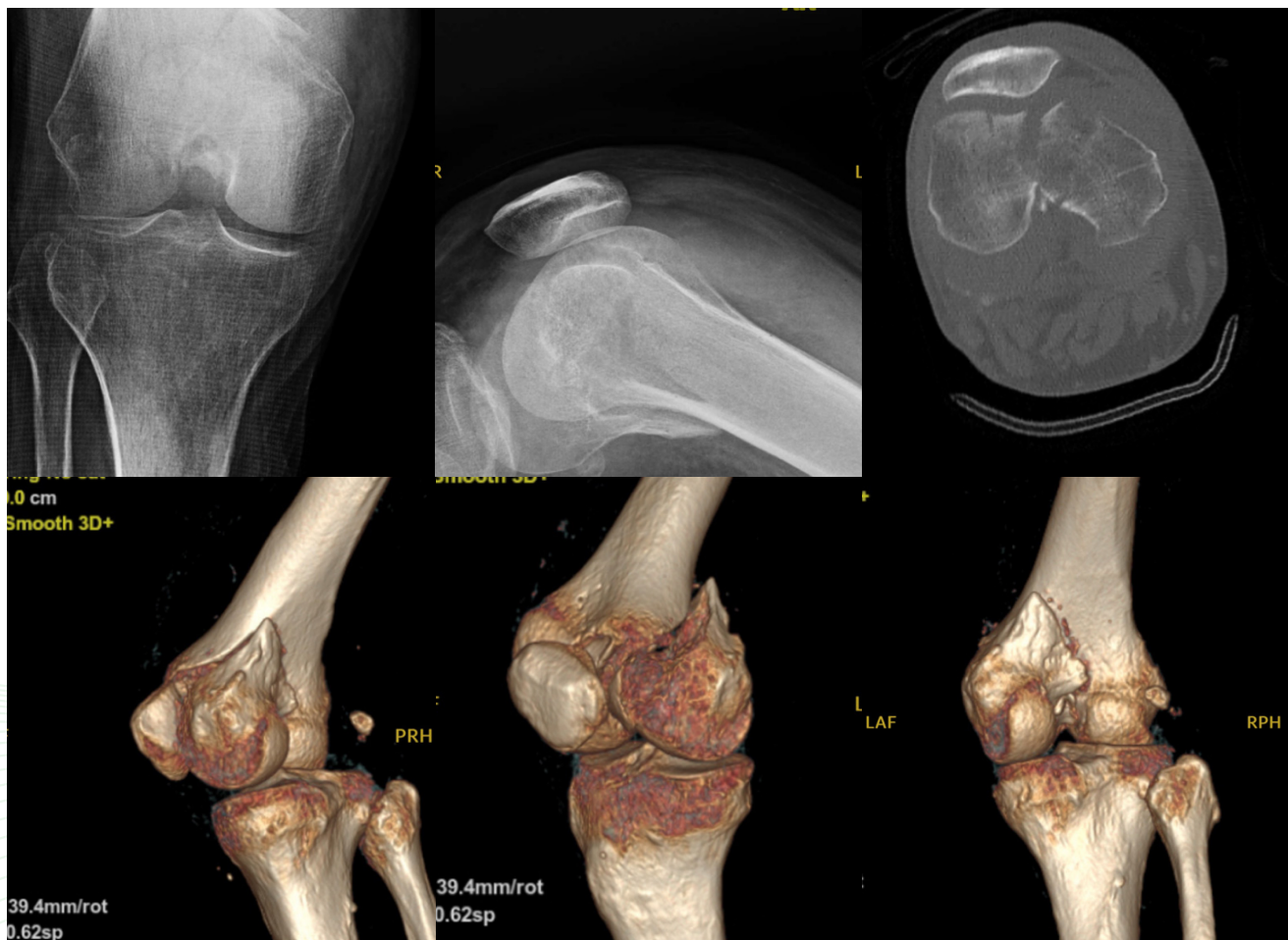
Patient was treated with open reduction and internal fixation. A medial parapatellar approach was taken to visualise the joint reduction. The small bone defect was filled with CERAMENT® BONE VOID FILLER.

HARDWARE

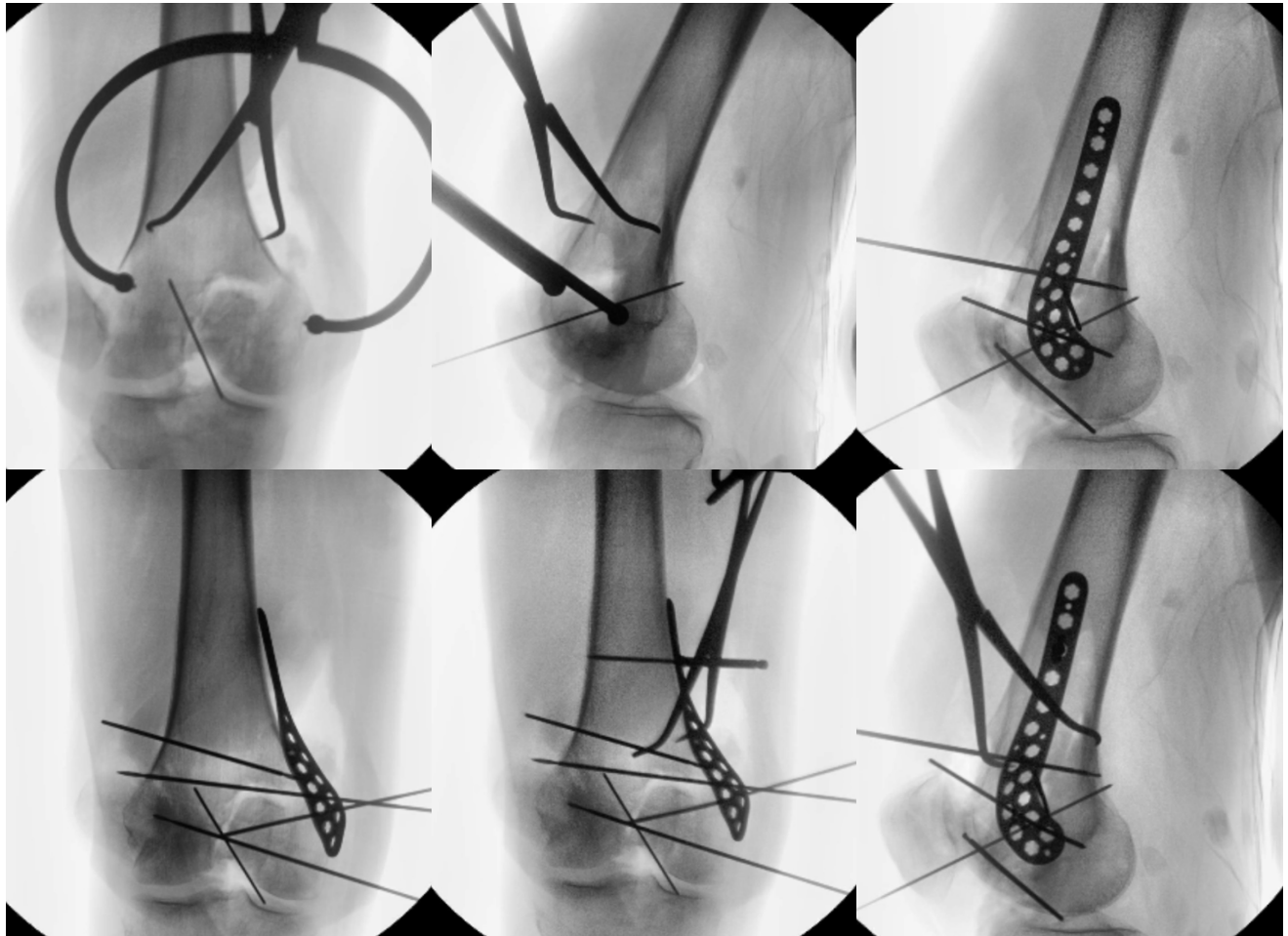
- Two headless compression screws.
- Anatomic 3.5mm large medial distal femur condylar plate.

OUTCOME

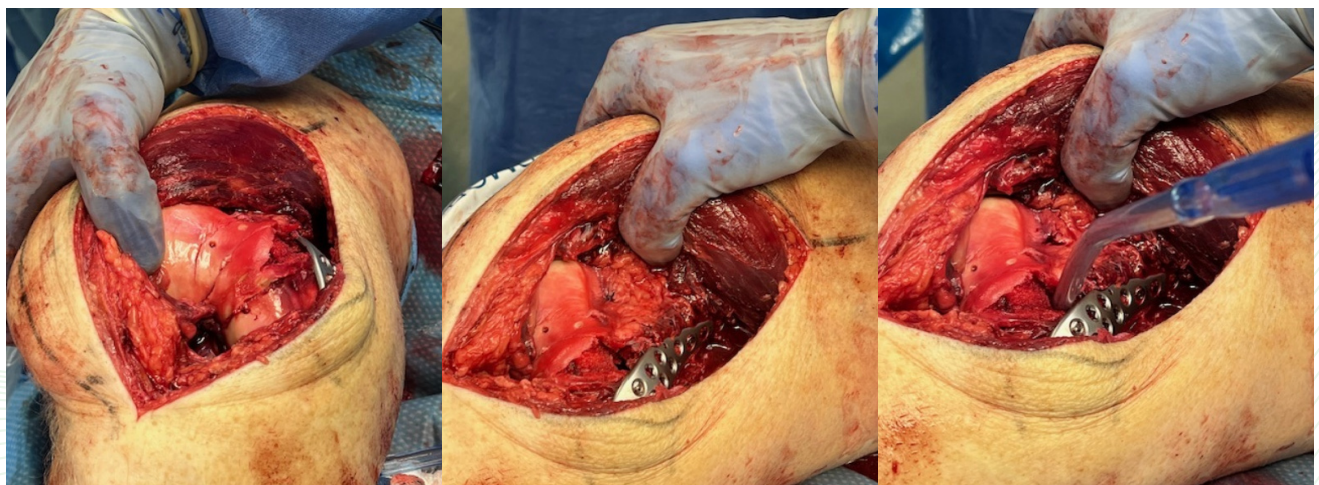
Fracture managed with open reduction and internal fixation and the bone void filled with CERAMENT BONE VOID FILLER. At 6 weeks follow up, the patient return to weight-bearing as tolerated without any issues.



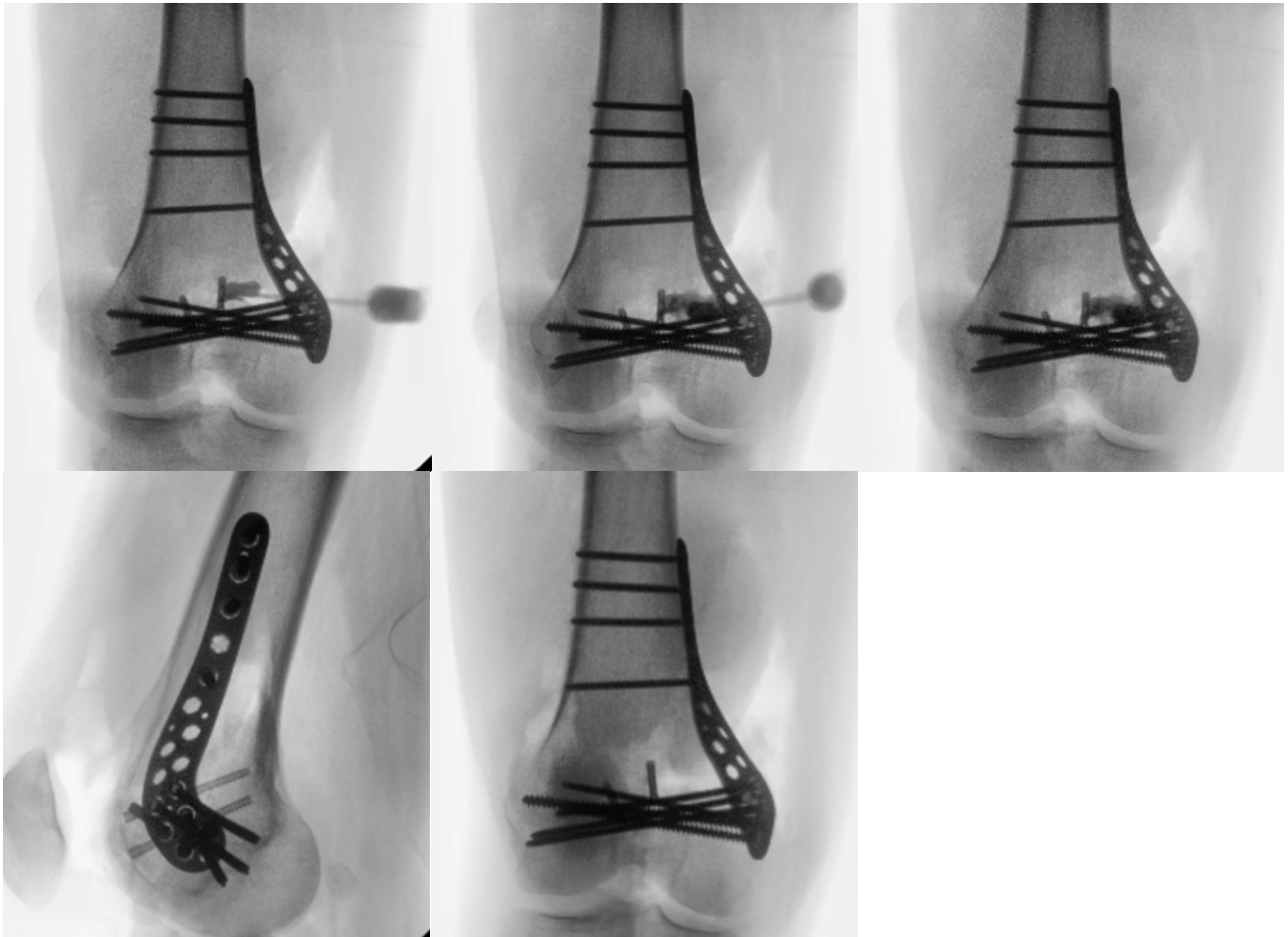
Pre-op: Radiographs and CT Scan showing patient with closed medial femoral condyle fracture with intra-articular extension.



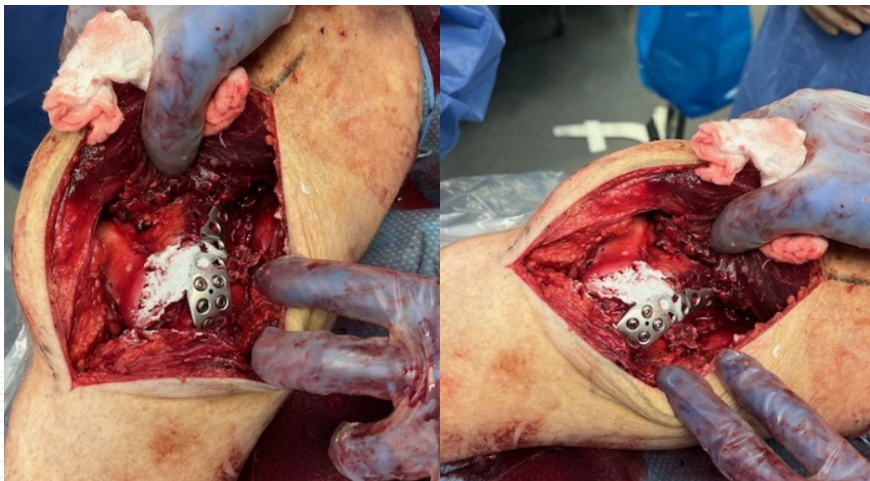
Intra-op: Sequence of provisional fixation followed by internal fixation.



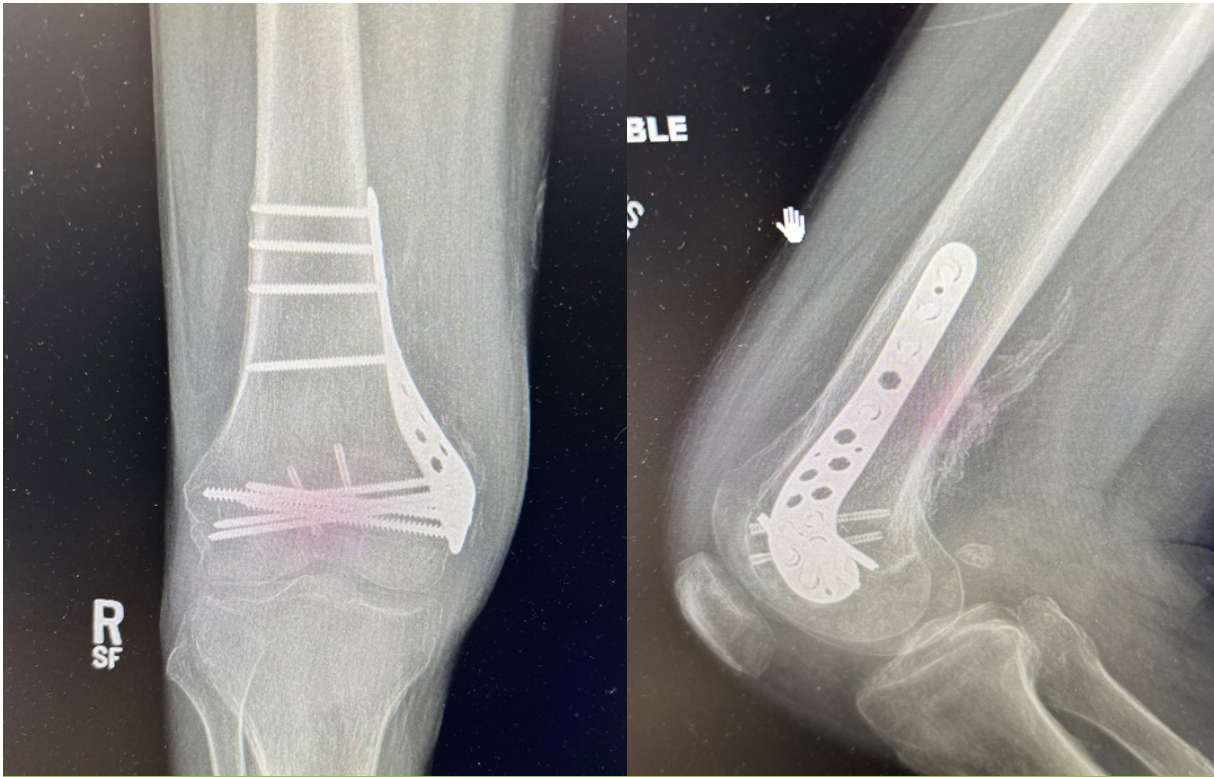
Intra-op: Intra-articular reduction and bone defect prior to injection of CERAMENT BONE VOID FILLER.



Intra-op: Images showing injection of CERAMENT BONE VOID FILLER.



Intra-op: Images of CERAMENT BONE VOID FILLER filling the bone void.



6 week post-op images.