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Calcaneal Fractures- Updates on minimal invasive subtalar approach

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The treatment of displaced intra-articular calcaneal fractures is divided into conservative and operative management. The latter consists of open reduction internal fixation (ORIF), percutaneous reduction internal fixation (PRIF), and the primary arthrodesis (PA). Conservative treatment, functional or using Plaster-of-Paris, might be considered in fractures with little displacement or compromised soft-tissues, as well as in patients with physical contra-indications (e.g., diabetes, peripheral vascular disease, obesity, and smoking) or psychological (e.g., low anticipated compliance, substance abuse). Since the mid-1990s, ORIF has been considered the gold standard treatment for displaced intra-articular fractures

of the calcaneus by most experts, as it generally provides good to excellent functional outcomes and the ability to anatomically restore the subtalar joint. Several open surgical techniques have been described in the past, of which the extended lateral approach has been applied most frequently. The main disadvantage of the open repair is the rate of wound complications, which may occur in up to 30% of patients. Alternative surgical approaches to the calcaneus include the limited lateral. The limited lateral approach has been described in various modifications with less complications and better functionality so far.

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