Percutaneous Screw Fixation As An Option In Sacral Fracture Management: A Case Series

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INTRODUCTION:
Sacral fractures accounts for 20-24% of all pelvic ring injuries and requires operative intervention when unstable. Left untreated, it may cause pain, disability and possible neurological compromise. Reported here is a case series of sacral ala fractures treated with percutaneous iliosacral screws.

CASE:
In our 1-year experience at Hospital Tuanku Ja’afar, Seremban, 6 patients with sacral ala fractures were treated with percutaneous iliosacral screw fixation using cannulated 7.0 mm screws. All patients were men aged 18-56. No neurological deficits or malunion developed during follow up patients able to weightbear at 3 months’ post op.

DISCUSSIONS:
Options for sacral fracture management include percutaneous iliosacral screw fixation, triangular osteosynthesis and transiliac plating of the sacrum. Cadaveric studies have yet to show superiority of any fixation construct to adequately resist vertical shear forces. Iliosacral screws have the advantage of being minimally invasive, reduced operative time and usage of uncomplicated instruments.

CONCLUSION:
Iliosacral screws seems to be effective for stabilisation of sacral fractures. Applicable with minimal soft tissue disruption, it limits blood loss as well as being able to maintain reduction for appropriate post operative rehabilitation for patients.

REFERENCES: