



# Proximal Femoral Locking Compression Plating : A Good Alternative For Proximal Femoral Fractures In Elderly?

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# INTRODUCTION

- The primary goal of management of proximal femoral fractures is to achieve anatomical reduction with a stable fixation. The rate of complications for the unstable fractures treated with DHS is as high as 3-15%. <sup>1,2</sup>
- Important complications with DHS: Uncontrolled collapse and lag screw cut-out. The lateral wall stability is important factor, thus keeping it intact decreases the rates of malunion and nonunion. <sup>3,4,5</sup>
- PFN is considered as implant of choice for unstable proximal fractures but is associated with many complications: penetration of anterior femoral cortex, prominence of lag screw in the lateral thigh, creation of a large hole in the greater trochanter (leading to abductors weakness) and potential for the Z-effect. <sup>6,7</sup>

# AIMS

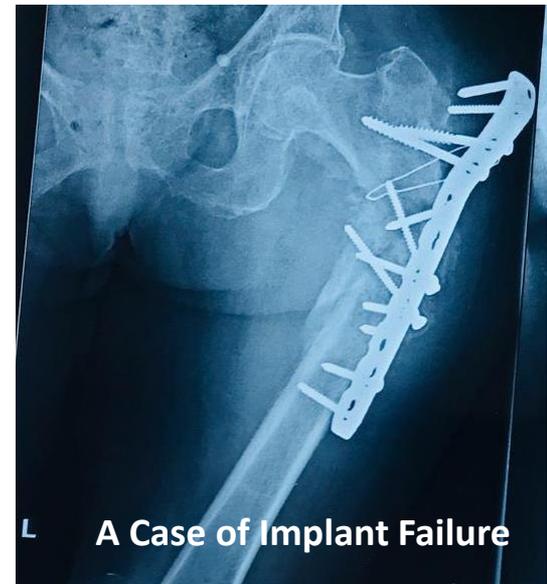
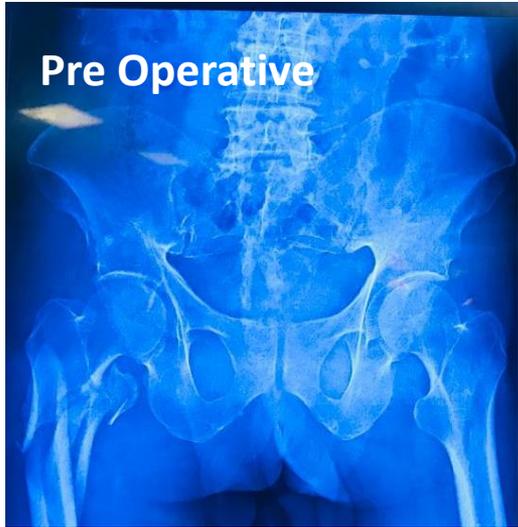
- To study the management and radiological outcomes of unstable proximal femoral fractures managed with proximal femoral locking compression plate (PF-LCP).

## MATERIALS & METHODS

- This prospective study was conducted at SGT Medical College, Hospital and Research Institute between May 2018 to June 2019.
- 18 patients with proximal femoral fractures between 50-70 years were included in the study.
- Open fracture, Pathological fracture, Inability to walk before fracture & those associated with shaft fractures were excluded from the study.

# RESULTS

- Patients were followed up till the evidence of union.
- Average Age of Presentation: **67.9 years**
- Average Union Rate : **89 % at 16 weeks.**
- Average Varus Collapse: **2.8 °**
- Average Harris Hip Score : **81.2**
- 1 case of Delayed Union at **20 weeks** : Bone Grafting was done which eventually progressed to union.
- 1 case of Non Union with implant failure: Implant Removal Followed By Bipolar Hemiarthroplasty.
- None of the cases revealed any significant shortening.



# CONCLUSION

- From this study we may conclude that PFLCP is a good alternative implant osteoporotic & comminuted fractures of proximal femur especially involving the lateral wall as it keeps the fragments in position & fracture tends to unite.
- PFN appears to be the implant of choice in most cases. However, in cases of complex comminuted fractures of proximal femur with extensive comminution of the lateral wall, PFLCP sits in a good place in coming years as lateral wall restoration is an important factor.