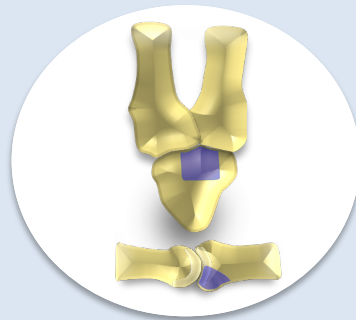


FRACTURES ARTICULAIRES IPP DES DOIGTS LONGS GREFFE OSTEOCHONDRALE D'HEMI- HAMATUM

A.DANNEPOND; M-L ABI-CHAHLA;
H.CHOUGHRI; A.DAHMAM; A.DELGOVE



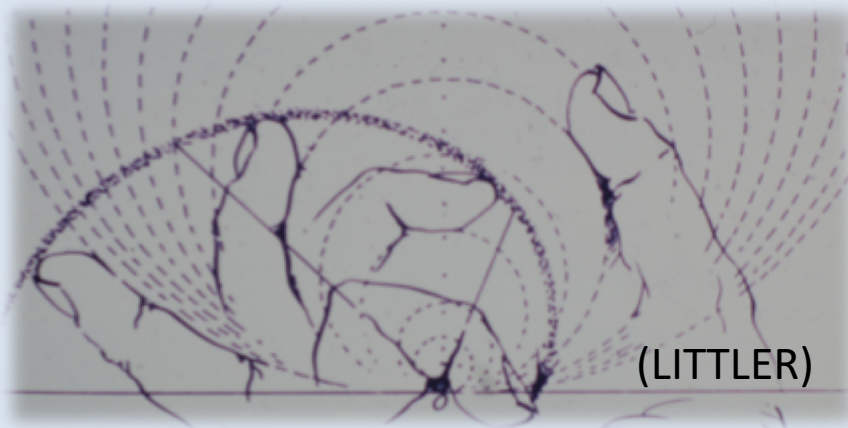
Congrès de la FESUM septembre 2019 Bordeaux



Physiologie

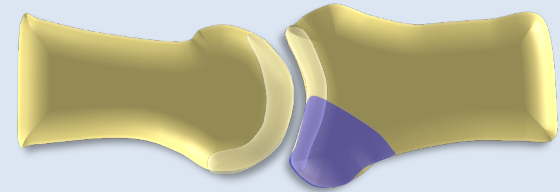
- IPP

- Articulation fonctionnelle ++
- Enroulement

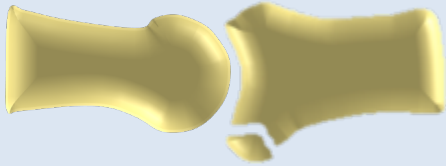


- Stabilité

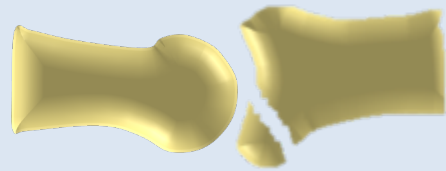
- Plaque palmaire
- « Surface articulaire: rebord palmaire de P2 »



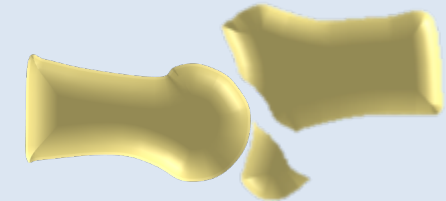
Classification



STABLE < 30 %



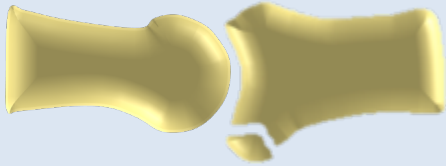
**COMPROMISE
30 % - 50 %**



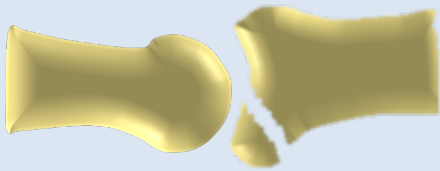
INSTABLE > 50 %



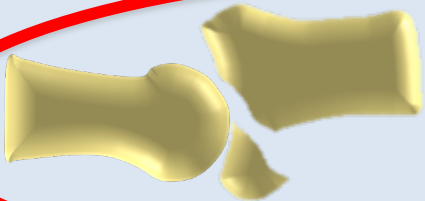
Classification



STABLE < 30 %



**COMPROMISE
30 % - 50 %**



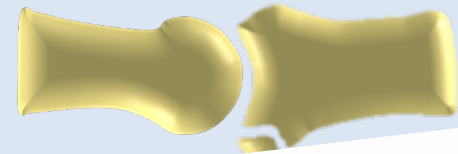
INSTABLE > 50 %



- Scanner préopératoire +++

Classification

STABLE < 30 %

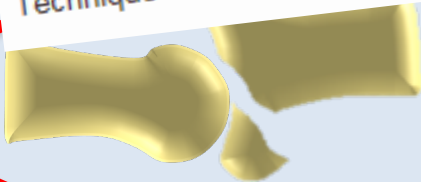


PIP Fracture/Dislocation Treatment Technique: Use of a Hemi-Hamate Resurfacing Arthroplasty

Williams, Rafael M. M. M.D.; Hastings, Hill II M.D.; Kiefhaber, Thomas R. M.D.

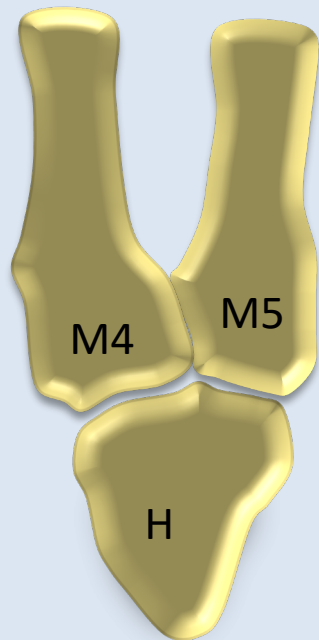
Techniques in Hand and Upper Extremity Surgery: December 2002 - Volume 6 - Issue 4 - p 185-192

INSTABLE > 50 %

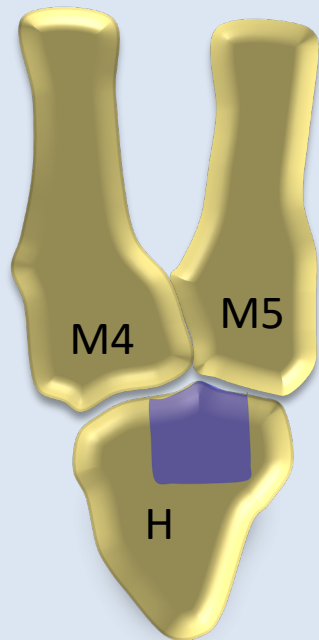


- Scanner préopératoire +++

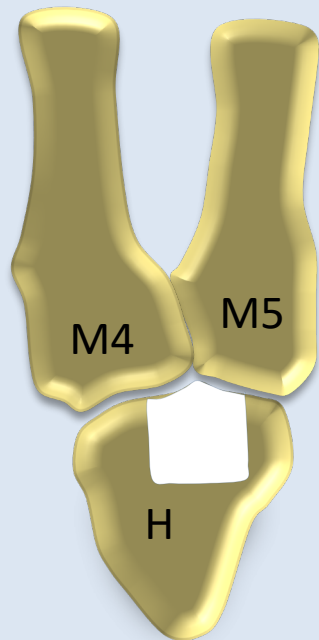
Principes



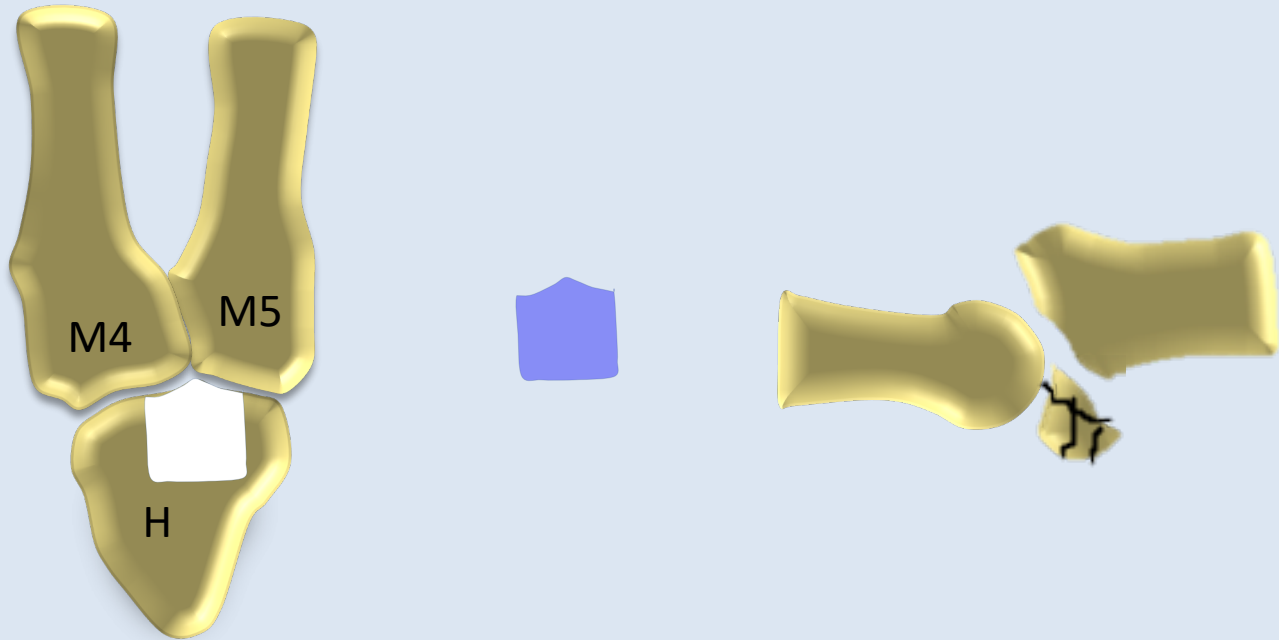
Principes



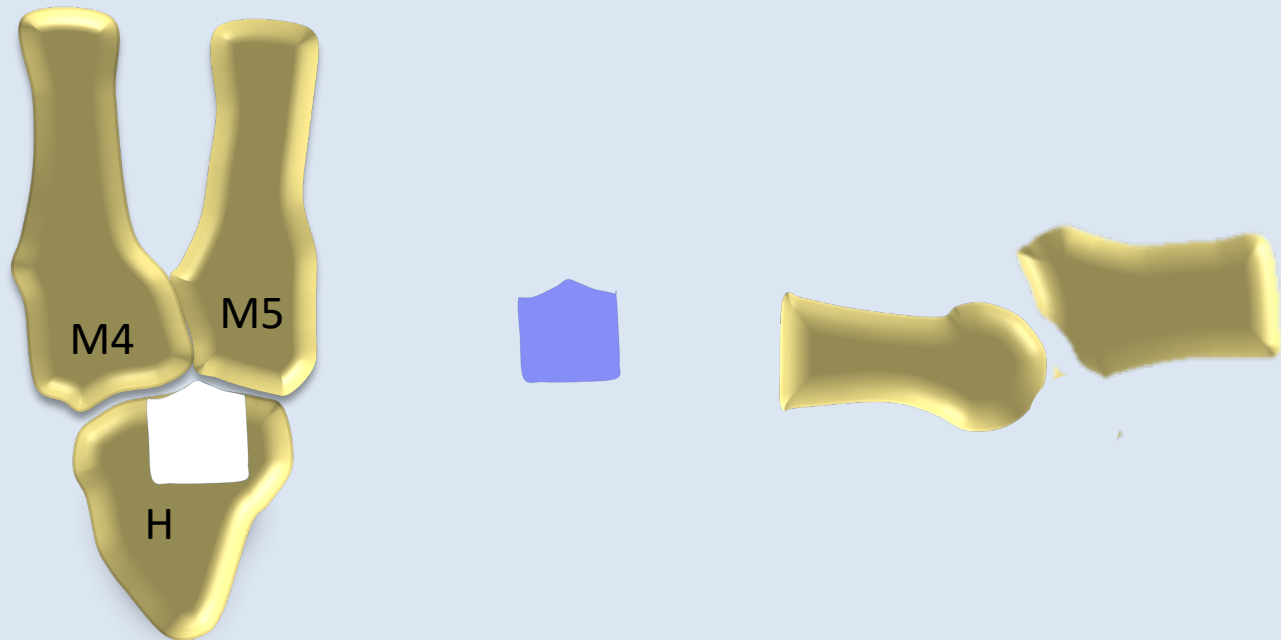
Principes



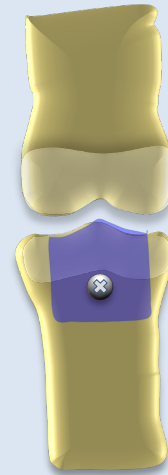
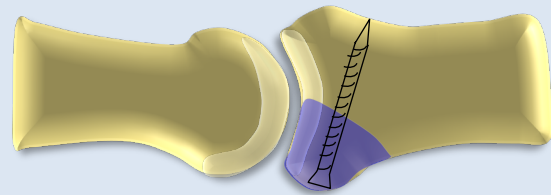
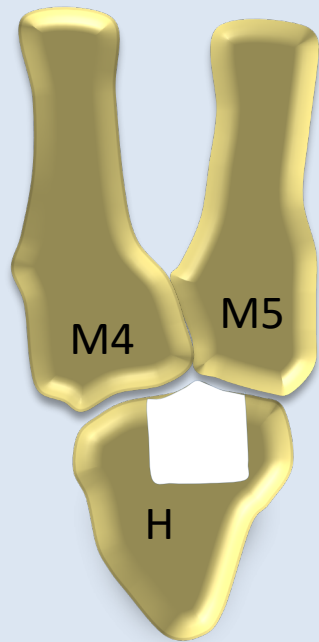
Principes



Principes



Principles

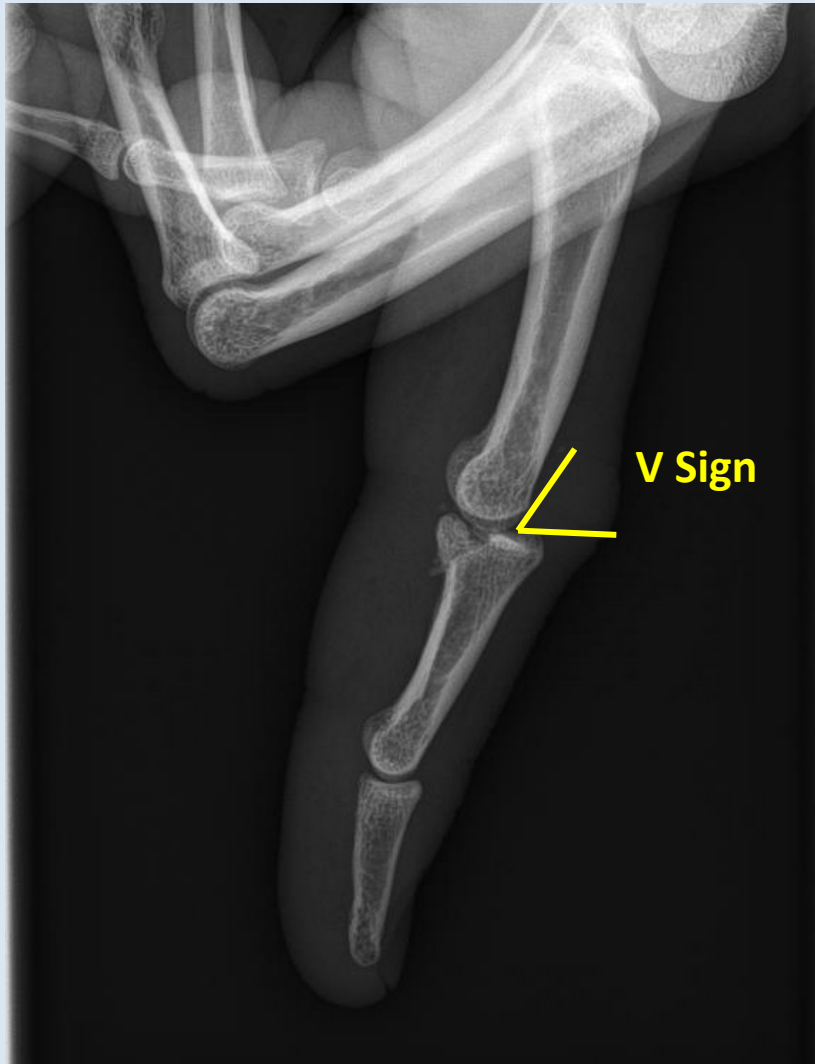


Cas 1

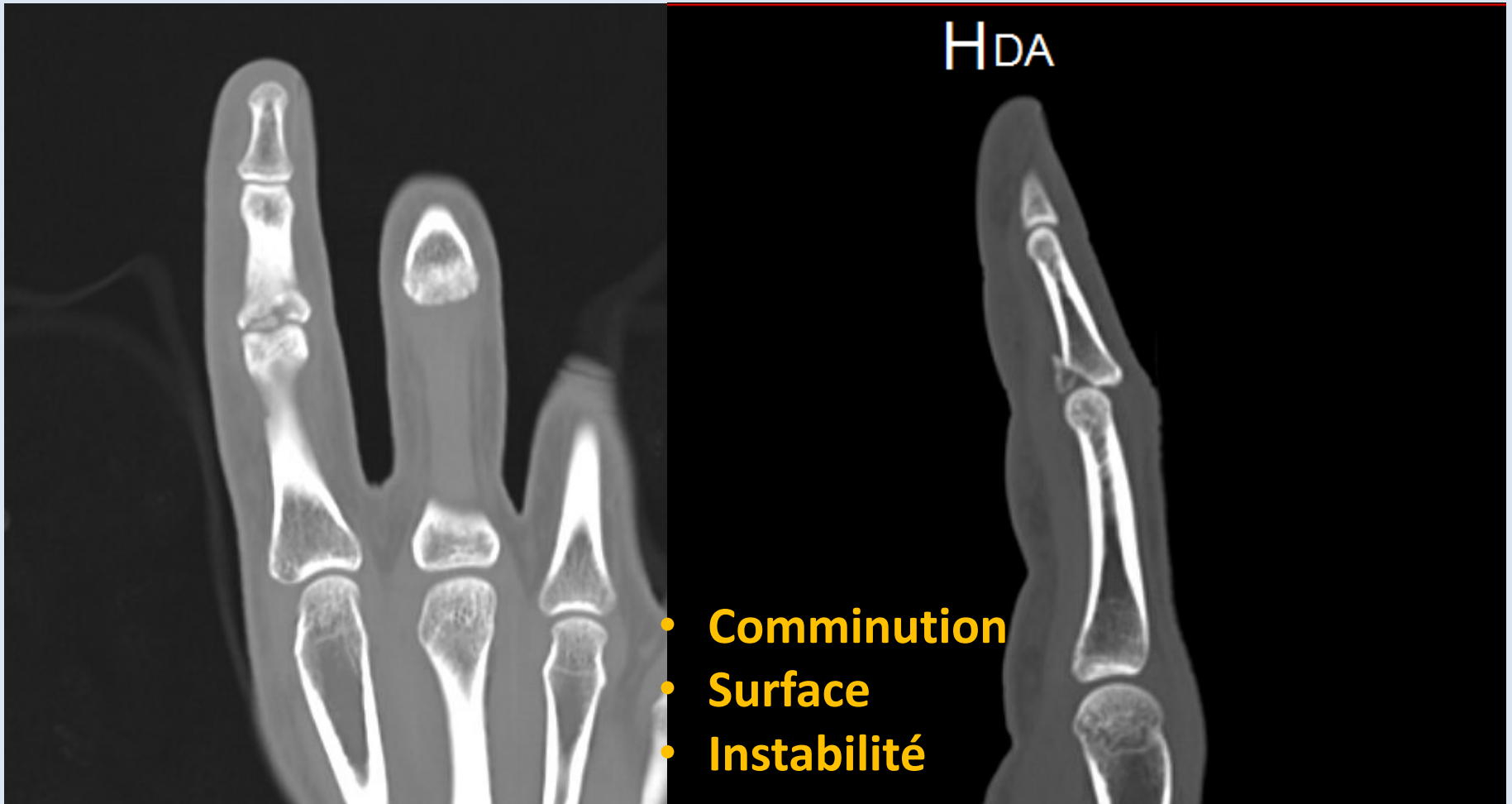
- Homme
- 36 ans
- AVP
- Fracture base P2D2
- Motivation
+++



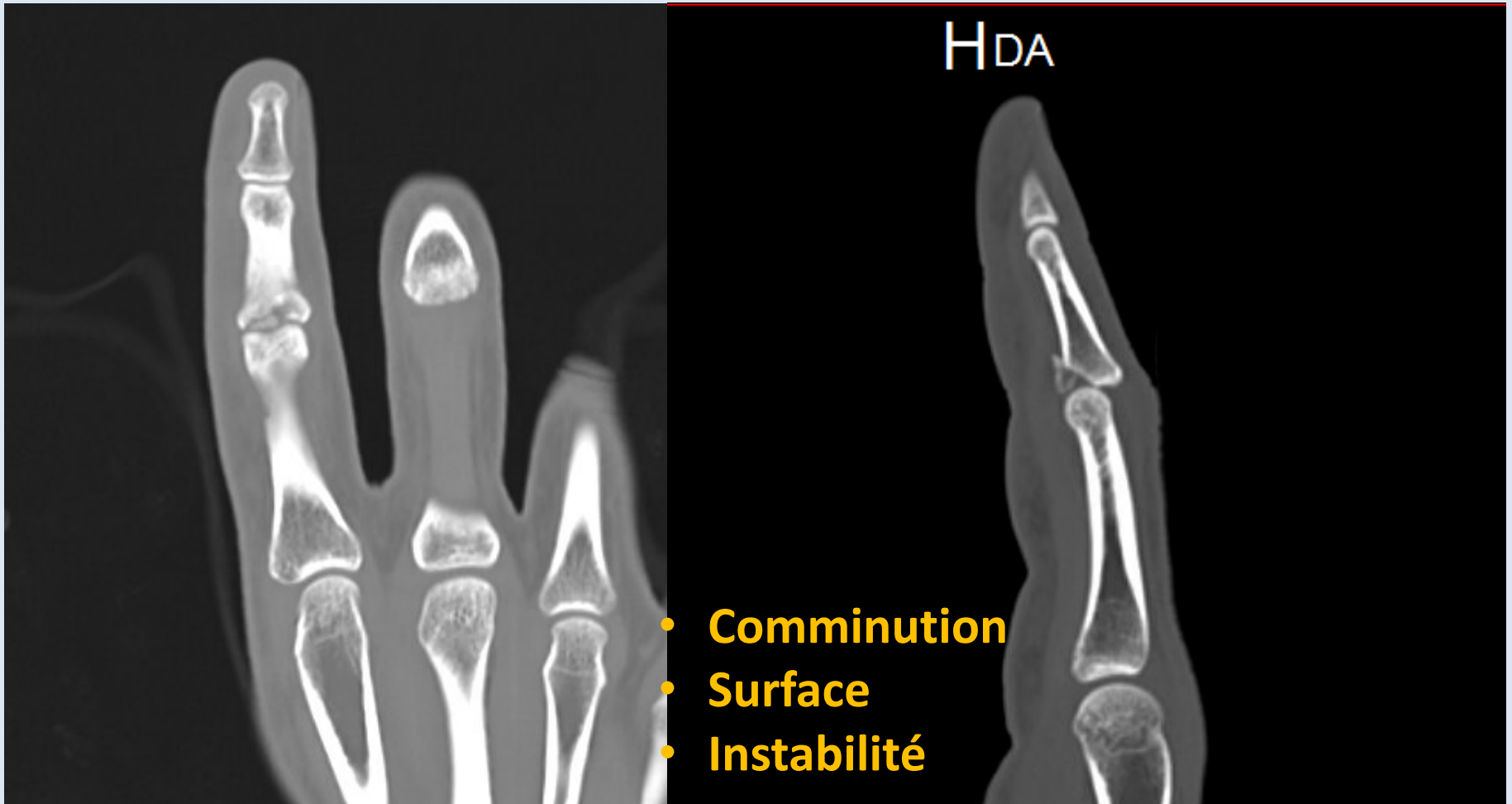
Cas 1



Cas 1

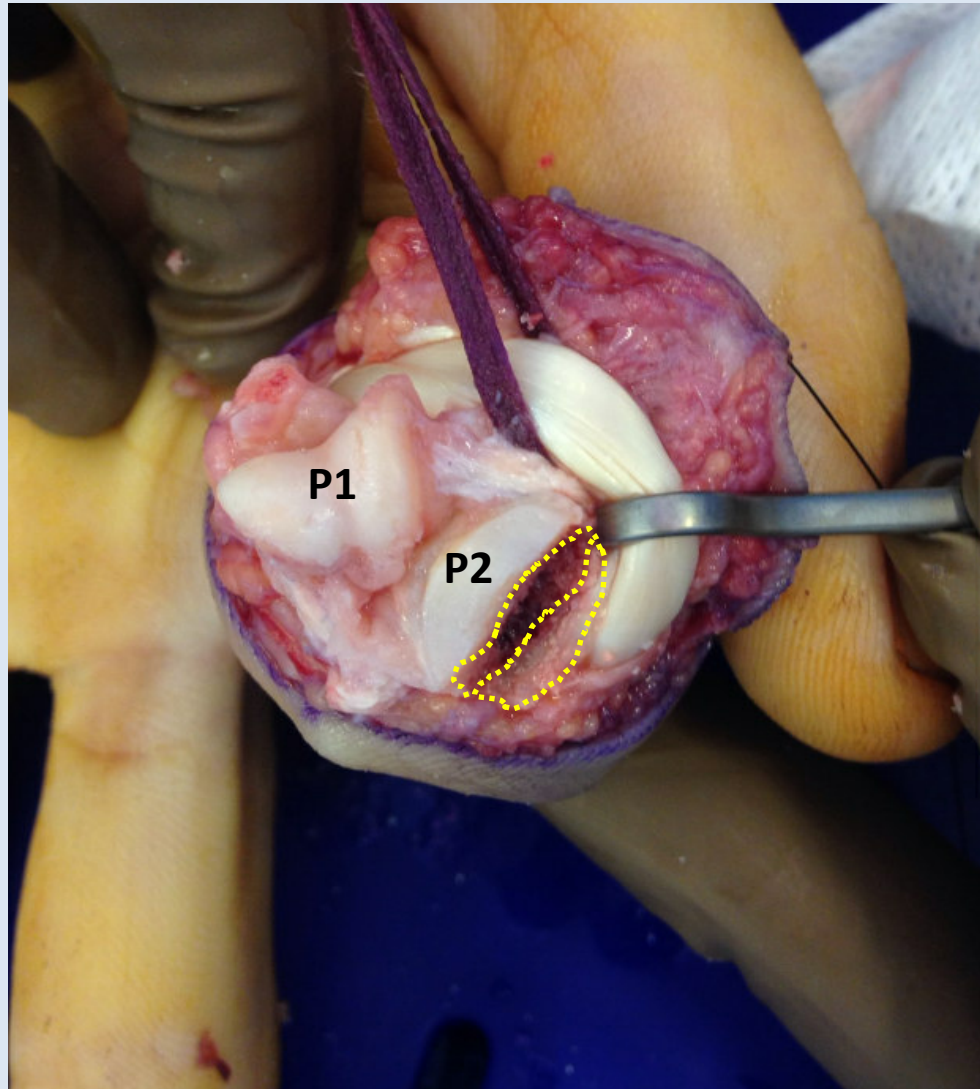


Cas 1

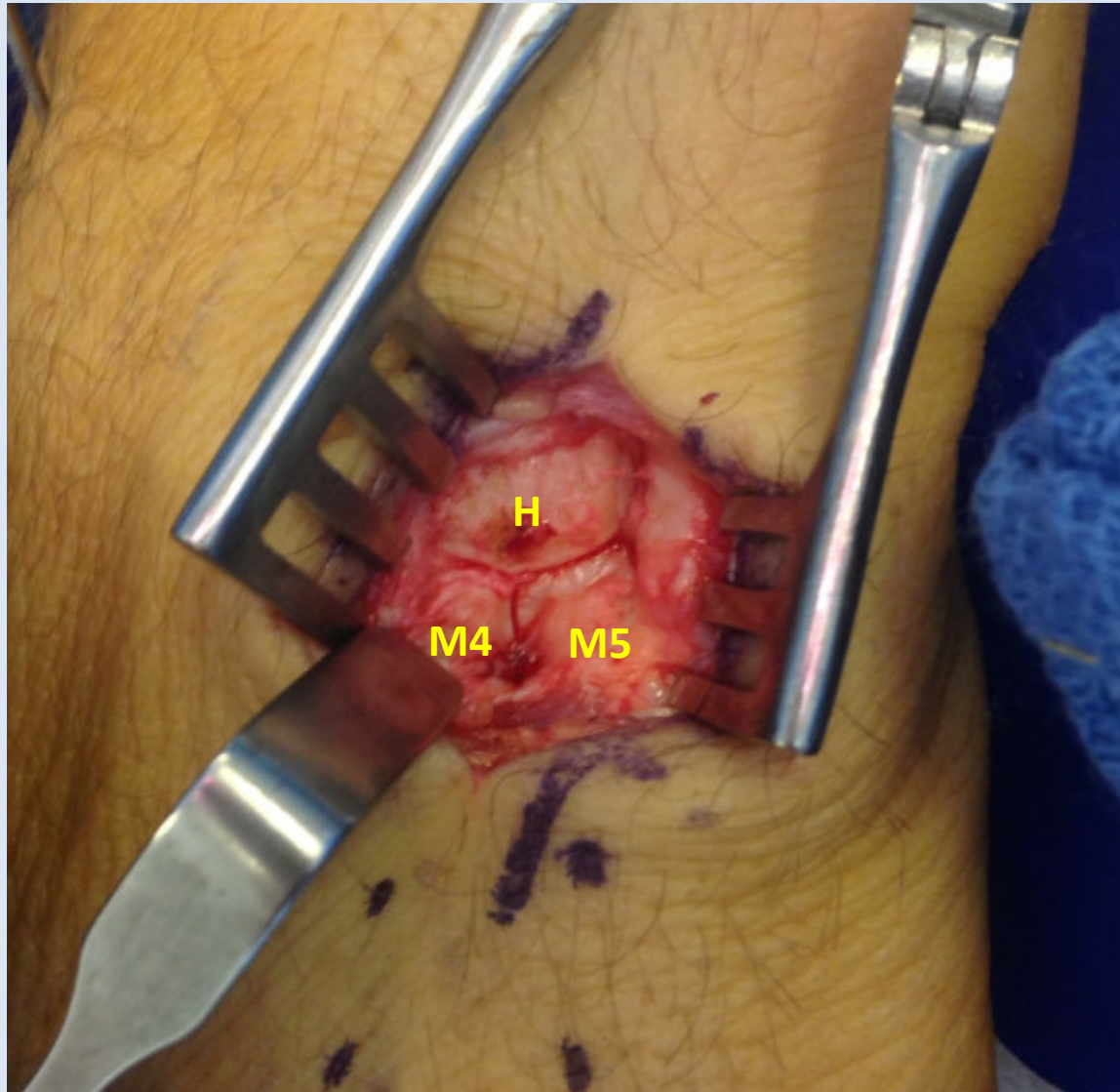


CONFIRMATION PER-OPERATOIRE

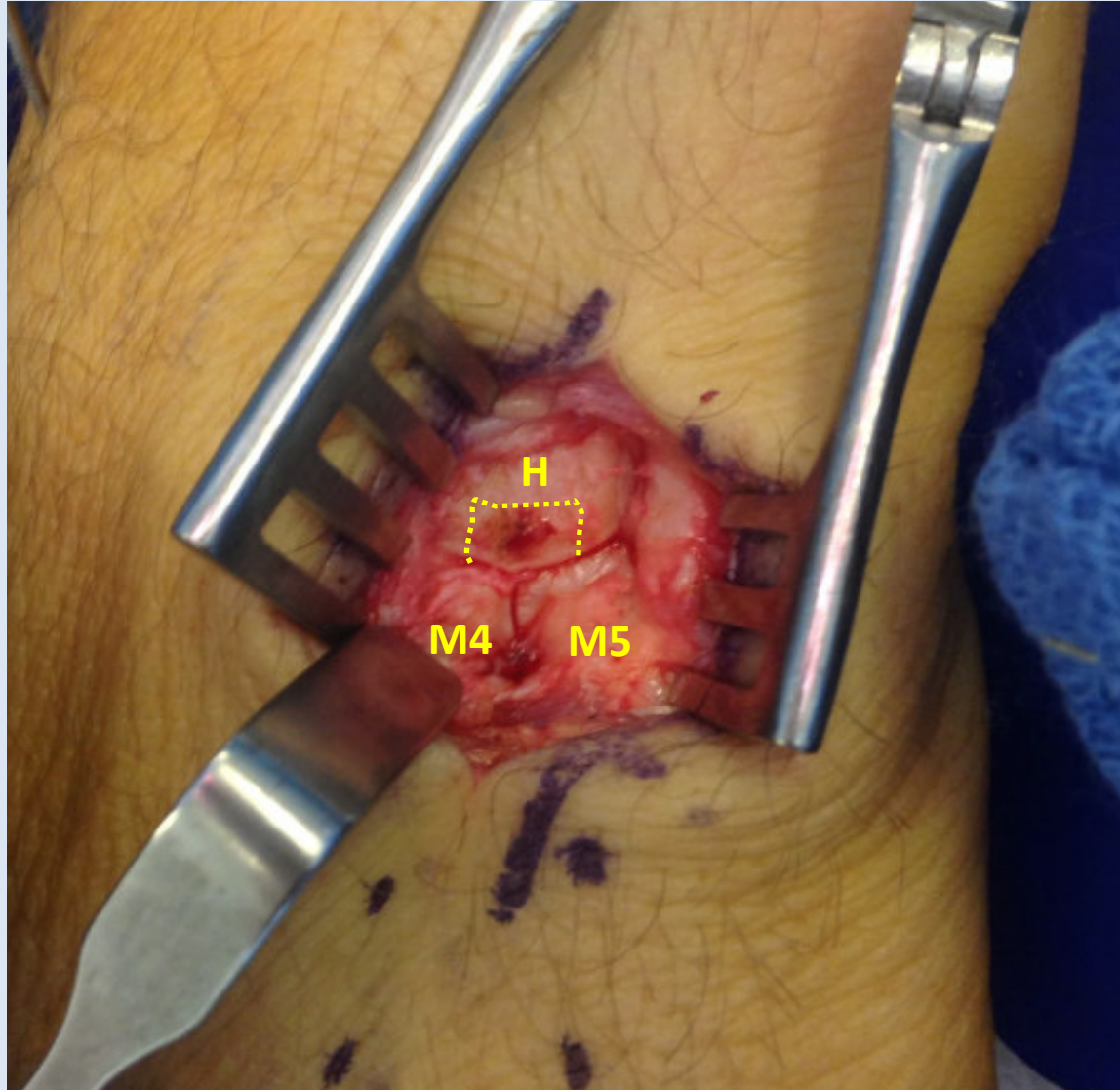
Cas 1



Cas 1



Cas 1



Cas 1



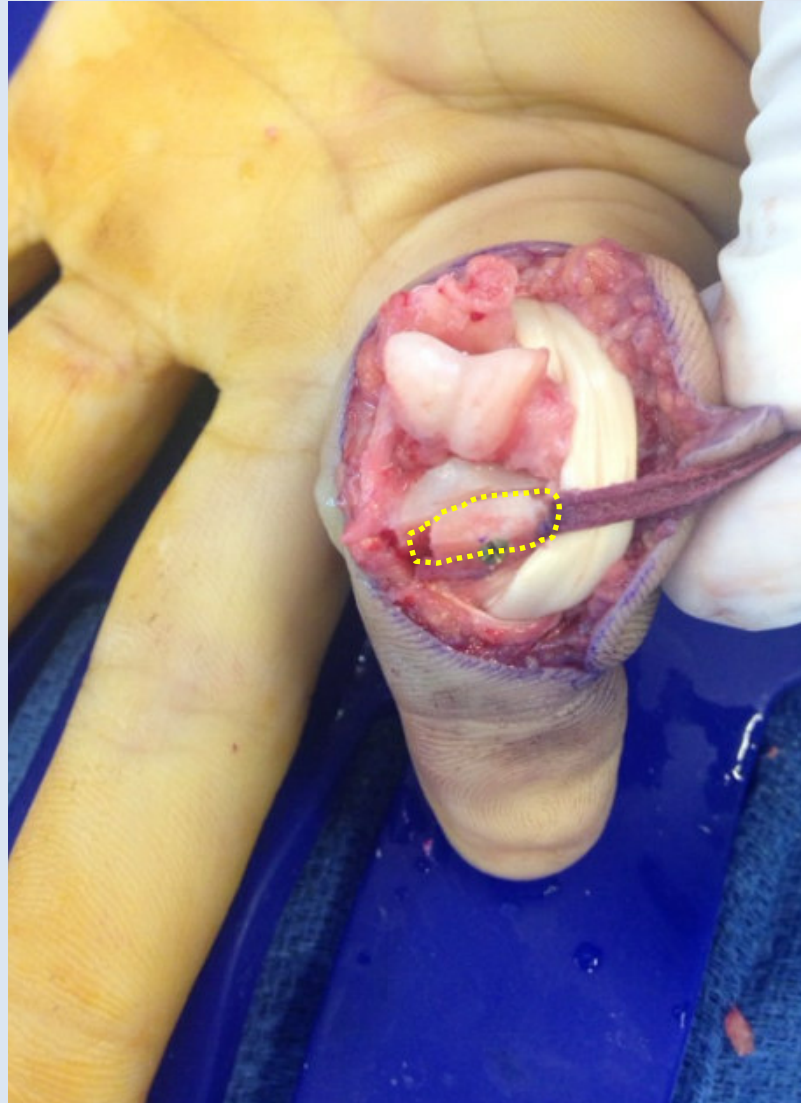
Cas 1



CAS 1



CAS 1



Cas 1



Cas 1



Cas 1



Cas 1



M +2

Synthèse consultation
chirurgicale

Va tres bien

RX RAS, consolidation quasi acquise

Enroulement : DPP actif 2.5cm, passif 0

Poursuite kiné, mise en place bande enroulement

AR dans un mois avec radio



Cas 1



M +2

Synthèse consultation chirurgicale

Va très bien
RX RAS, consolidation quasi acquise
Enroulement : DPP actif 2.5cm, passif 0
Poursuite kiné, mise en place bande enroulement
AR dans un mois avec radio



M +3

Synthèse consultation chirurgicale

Va très bien
RX RAS, consolidation acquise
Excellent résultat, enroulement : DPP actif <0.5 cm, passif 0
Poursuite kiné
AR dans à 6 mois avec radio

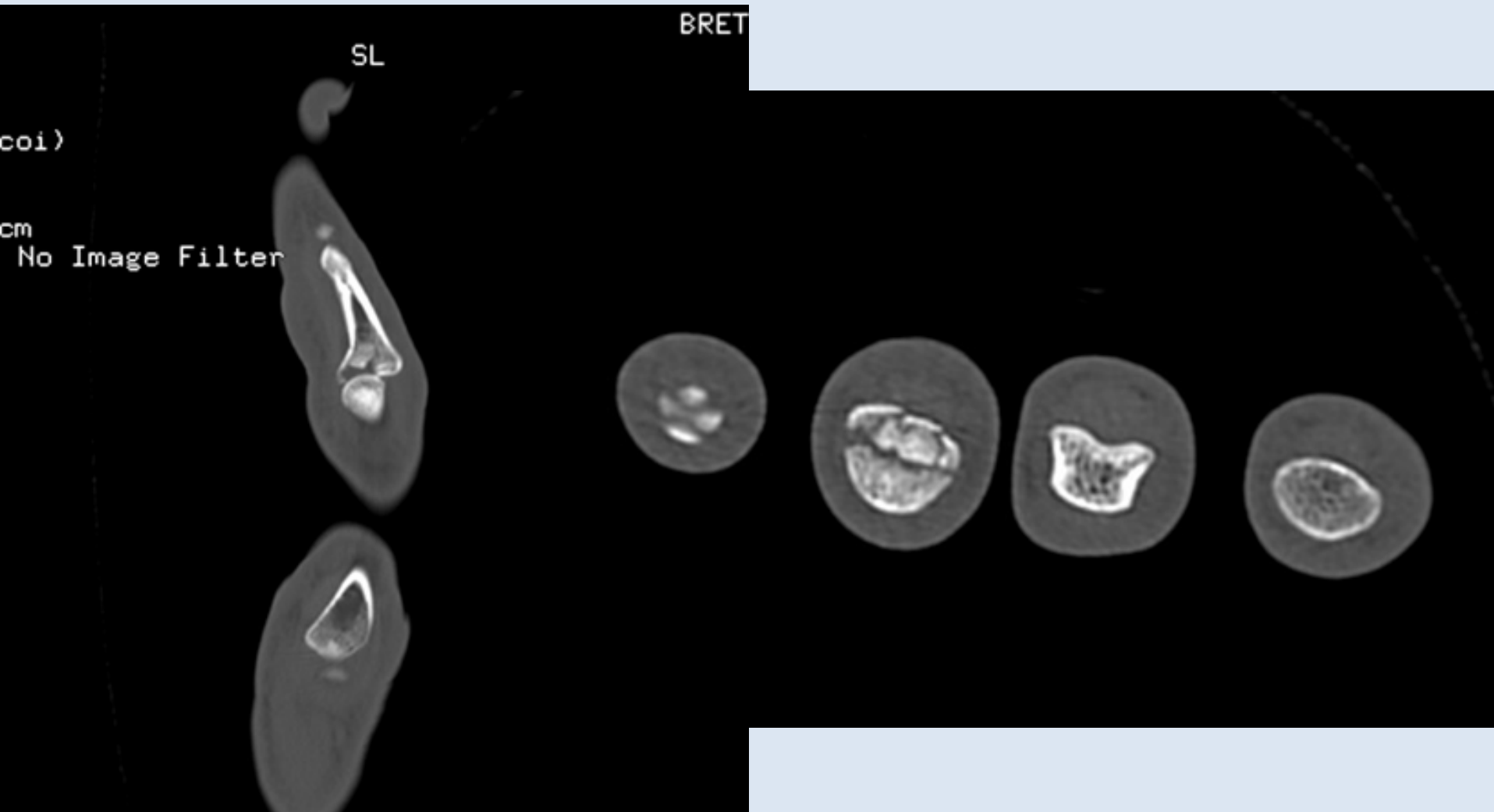


Cas 2

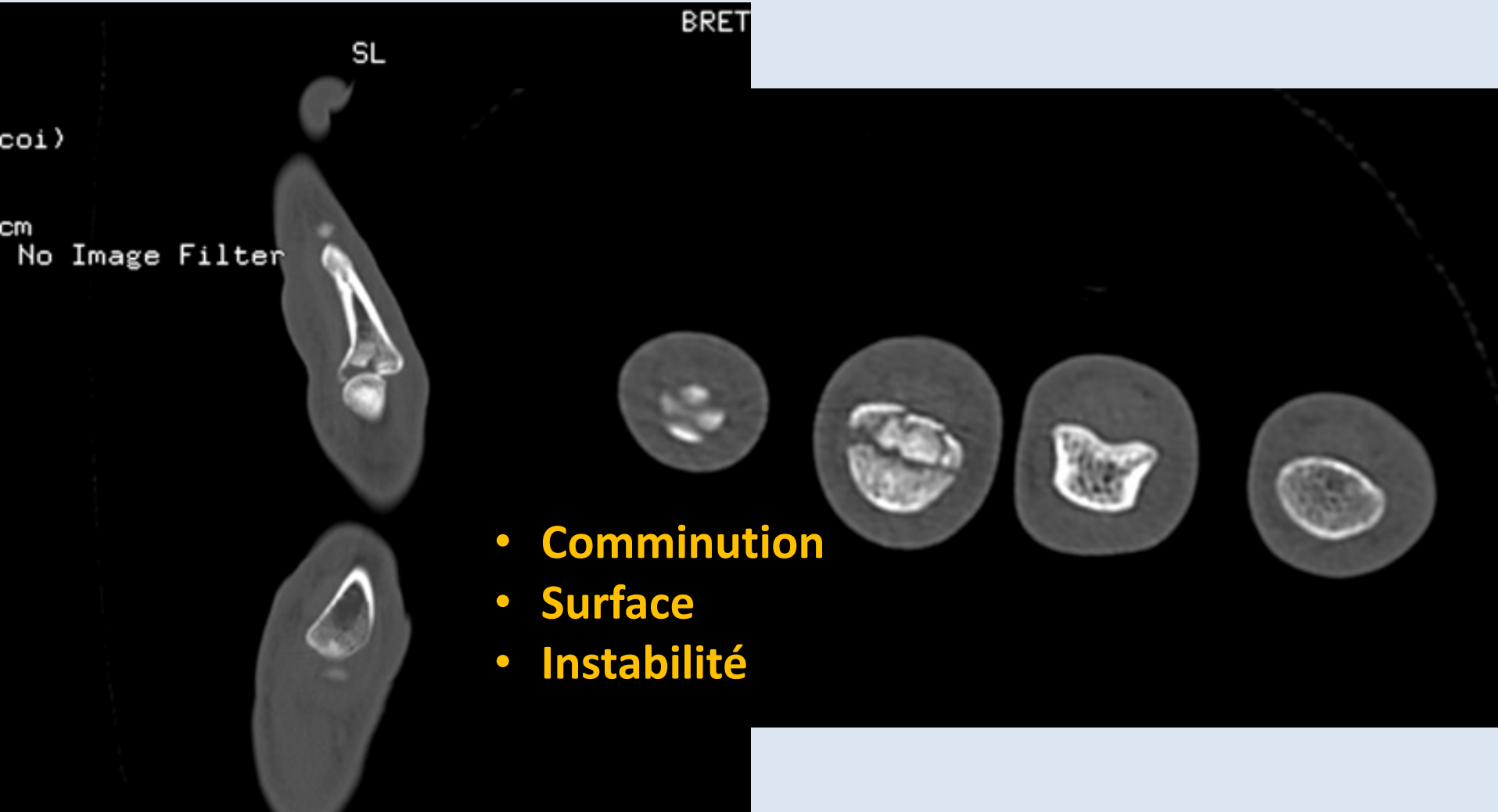
- Homme 28A
- Militaire, force spéciale
- Fracture base P2 D4, traumatisme sportif
- Motivation +++



Cas 2



Cas 2



Cas 2



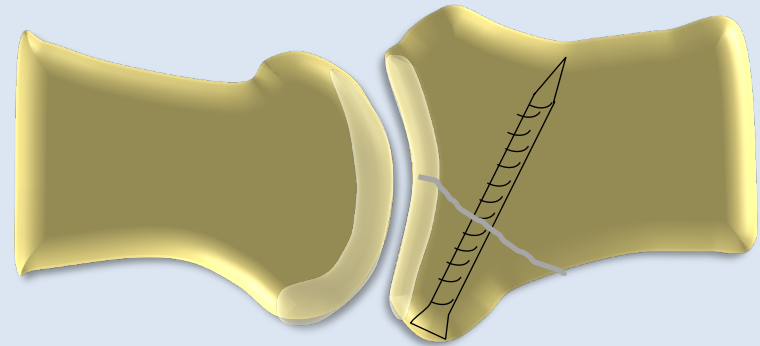
Cas 2



suivi d'une greffe d'hamatum pour reconstruction de la base de P2 du 4e doigt
kiné + orthèse enrroulement: contact pulpe paume ok en passif sans probleme mais déficit flexion active IPD,
probables adhérences
aucune douleur, a repris son travail dans l'armée de terre (pompes, travail de cordes sans problemes), pas de
douleur au niveau de la prise de greffe mais raideur minime en extension (déficit 20°)
Arret kiné, prescription écho et AR pour envisager ténolyse aux alentours du mois d'avril

Discussion

- Alternatives ? (Fixation voie ouverte, distraction dynamique...)



Discussion

- Alternatives ? (Fixation voie ouverte, distraction dynamique...)
- Résultats satisfaisants

	Q-DASH	MOBILITE IPP	DOULEUR	FORCE
Moyenne	11	83°	1,1	82%

Treatment of unstable proximal interphalangeal joint fractures with hemi-hamate osteochondral autografts

M. Burnier¹, T. Awada², F. Marin Braun², P. Rostoucher¹,
M. Ninou¹ and L. Erhard¹

The Journal of Hand Surgery
(European Volume)
XXE(X) 1-6
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DOI: 10.1177/1753193416671886
jhs.sagepub.com



Discussion

- Alternatives ? (Fixation voie ouverte, distraction dynamique...)
- Résultats satisfaisants
- → Futur
 - Devenir (articulation CMC, IPP, greffon) ?
 - Evaluation standardisée / suivi long terme

HEMI-HAMATE OSTEOCHONDRAL TRANSPLANTATION IN
PROXIMAL INTERPHALANGEAL DORSAL FRACTURE
DISLOCATIONS: A MINIMUM 4 YEAR FOLLOW-UP IN
EIGHT PATIENTS

G. AFENDRAS, A. ABRAMO, A. MRKONJIC, M. GEJER, P. KOPYLOV and M. TÄGIL

From the Hand and Upper Extremity Unit, Department of Orthopaedics, Clinical Sciences, Lund University, Lund, Sweden

Conclusion

- Indications
- Courbe d'apprentissage
- Temps opératoire
- Technique encourageante
- A suivre...





Merci de votre attention

