ARTHROPLASTIC SURGERY





So many Recent Advances....



JOINT PROBLEM

- ANALGESIC
- PT
- BRACE
- INTERVENTION
- ARTHRODESIS
- ARTHROPLASTY

WHEN ARTHROPLASY

- PAINFULL JOINT
- LOSS OF ROM
- JOINT DESTRUCTION
- DEFORMITY
- LLD

FINALLY

LOSS OF FUNCTION

GOAL

- PROVIDE FUNCTIONAL ROM
- STABLE
- LONGEVITY
- DEFORMITY CORECCTION
- LLD

MOBILE

HOPENESS

CONTRA INDICATION

INFECTION
NEUROVASCULAR
MUSCULAR
PAIN FREE JOINT & STABLE

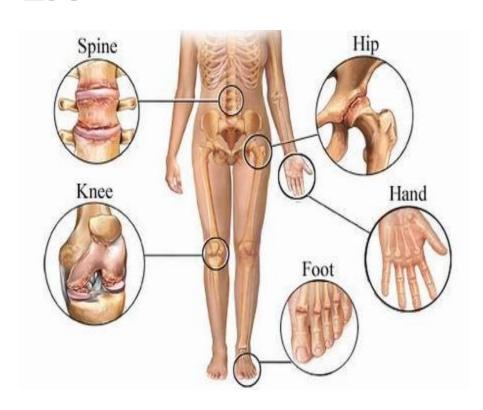


Orthopaedicians choice

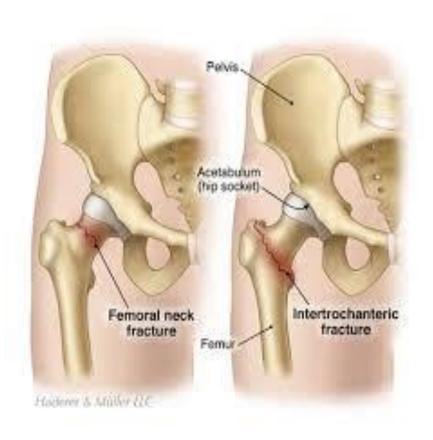
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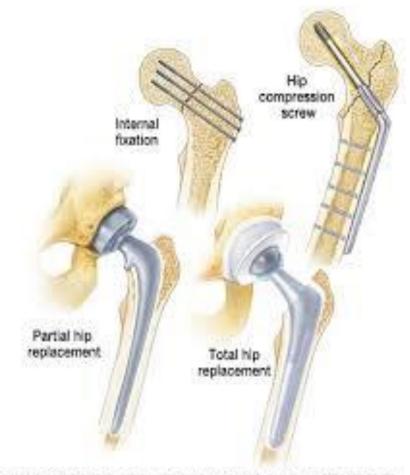
Recent Advances in

- Hip Arthroplasty
- Knee Arthroplasty
- Shoulder Arthroplasty
- Elbow Arthroplasty
- Ankle Arthroplasty
- Spine Arthroplasty
- Radial Head Arthroplasty
- CMC Joint Arthroplasty
- PIP Joint Arthroplasty



Hip fx

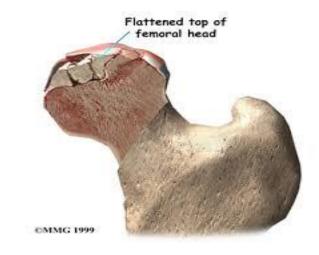




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AVN &OA



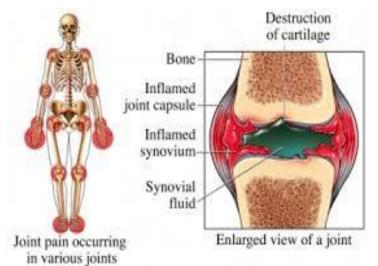




ARTHRITIS

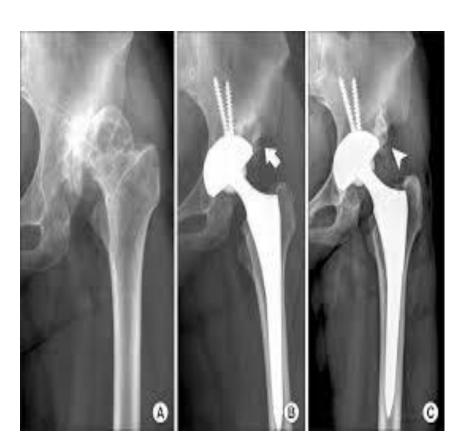


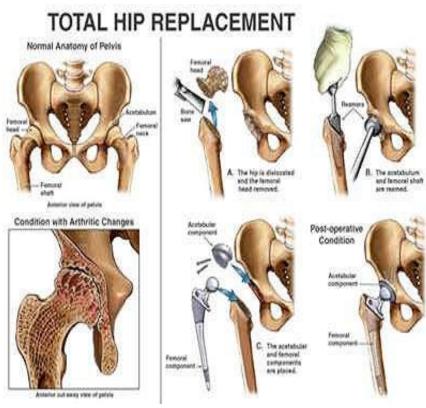




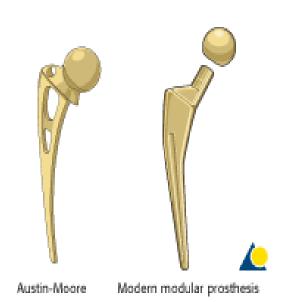


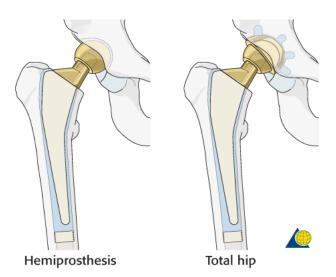
HIP



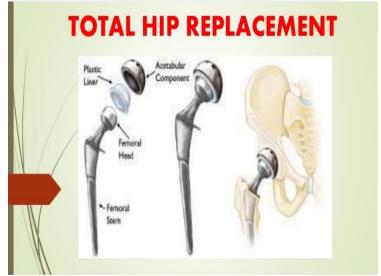


HIP





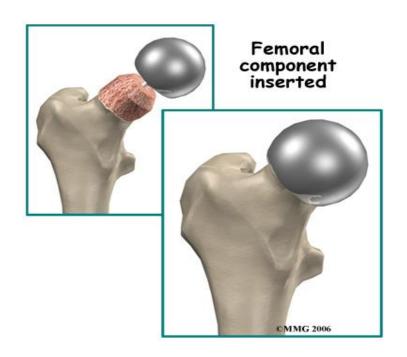




Hip Resurfacing Surgery



Technique- Femoral head cemented in





What is Dual Mobility?

Head articulates within a retentive polyethylene Polyethylene is free to move in metalback shell in a NON RETENTIVE way Do not confuse with bipolar cups





Knee Arthroplasty



INDICATIONS

- Severe arthritis
- Young pts with systemic arthritis with multiple joint involvement
- Osteonecrosis with subchondral collapse of a femoral condyle
- Severe pain from chondrocalcinosis and pseudogout in elderly
- Severe patello femoral arthritis rarely

CONTRA-INDICATIONS

Recent/current knee sepsis

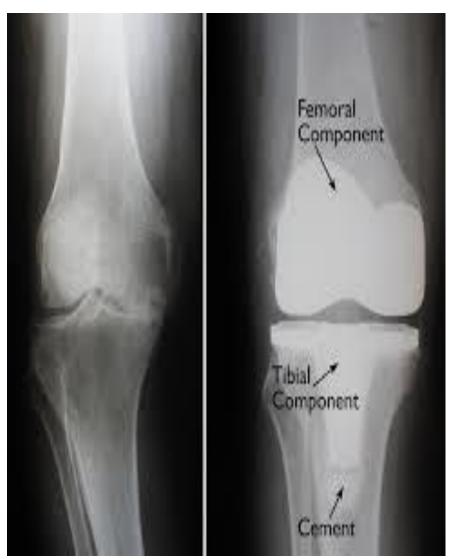
Remote source of ongoing infection

Extensor mechanism discontinuity

Recurvatum deformity secondary to muscle weakness

Presence of painless, well functioning knee arthrodesis

TKA





UNICONDYLAR

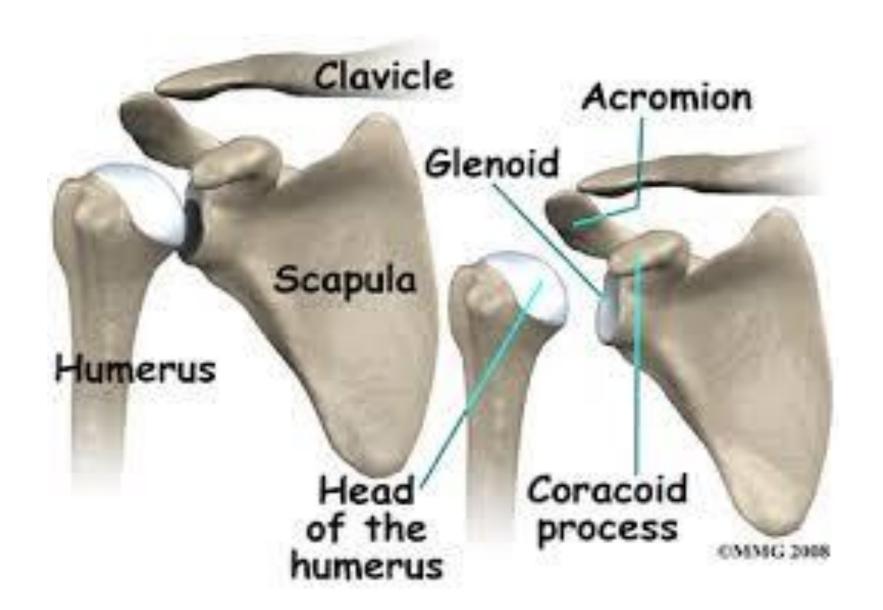




Medial compartment knee replacement

Total Shoulder Arthroplasty





INICATION

Table 2

Relative Indications for Reverse Total Shoulder Arthroplasty for Proximal Humeral Fractures

Three- and 4-part fractures in patients older than 70 y

Nonreconstructable fractures, particularly of the tuberosities

Symptomatic nonunion or malunion

Fractures with a high risk of avascular necrosis

Preexisting arthritis

Presence of a rotator cuff tear

Arthroplasty in PHFxs

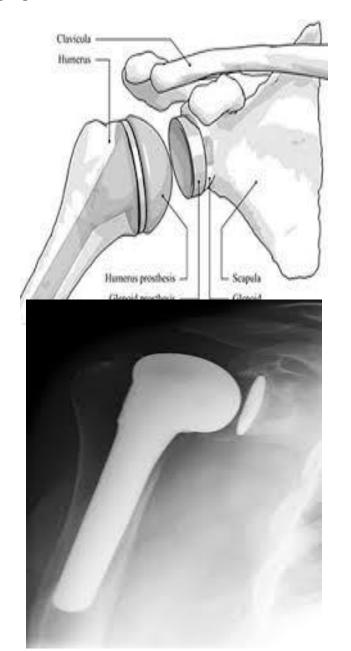
- 4-part fractures,
- fracture dislocations,
- head-splitting fractures,
- impaction fractures,
- humeral head fractures with involvement of more than 50% of the articular surface, and
- 3-part fractures in elderly patients with osteoporotic bone. However, heterogeneity of fracture patterns exists within these groups



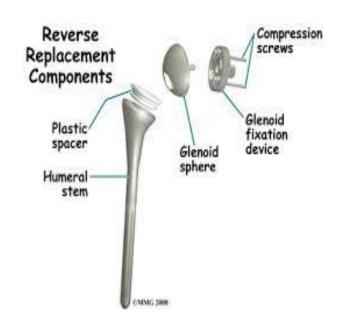
Humerus Replacement Post-accident Normal Anatomy Subsequent Condition Final Condition Condition. Impacied Person from linearity. Commission of the set property fractional point and major

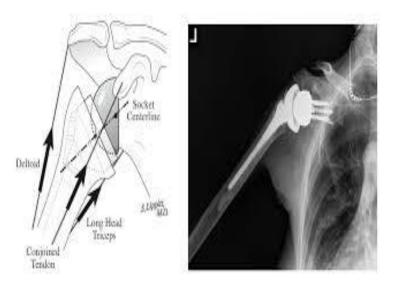
TSA



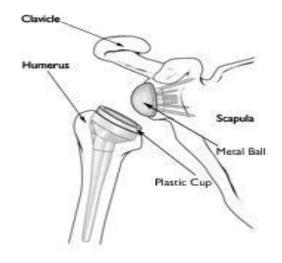


RSA









Resurfacing the shoulder



Total Elbow Arthroplasty



Indications for Total Elbow Arthroplasty

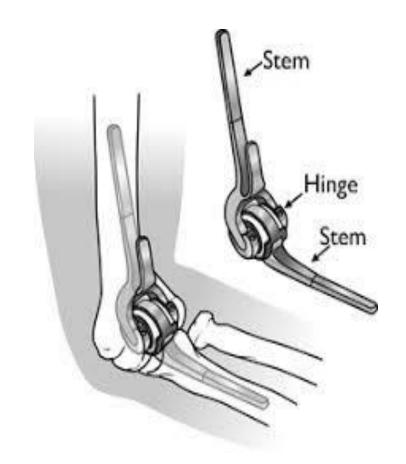
Severe joint pain

Articular destruction of the humeroulnar and humeroradial joints

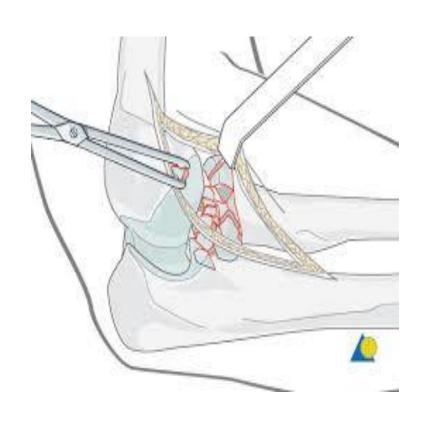
RA is one of the most common pathologies leading to a TEA

Significant instability of the elbow joint Failed radial head resection

Joint Surgery and Postoperative Management - TEA



RADIAL HEAD FX





Total Ankle Arthroplasty





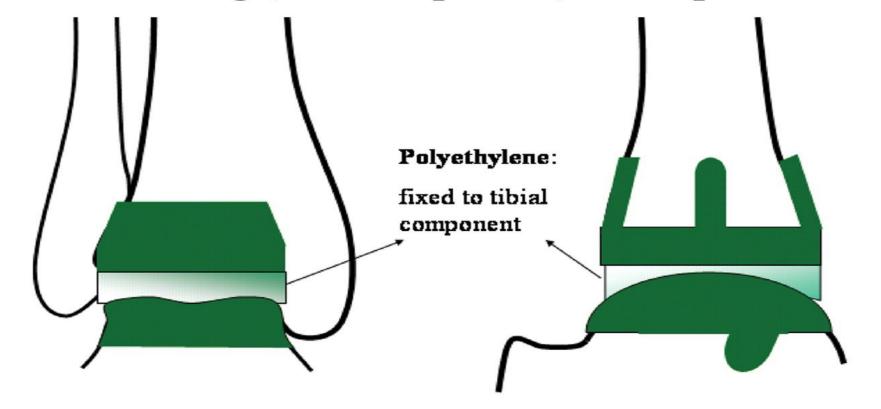
Indications

- For patients with unremitting pain and irreversibly damaged joints:-
- Severe osteoarthritis
- * Rheumatoid arthritis
- Selected fracture (femoral neck fracture).
- Failure of previous reconstructive surgery (osteotomy, cup arthroplasty, femoral neck fracture complication – non union, avascular necrosis)
- Congenital hip diseases.
- Pathologic fractures from metastatic cancer.
- Joint instability.



The ESKA ankle prosthesis (Germany) ESKA:

fixed-bearing (two-component) ankle prosthesis



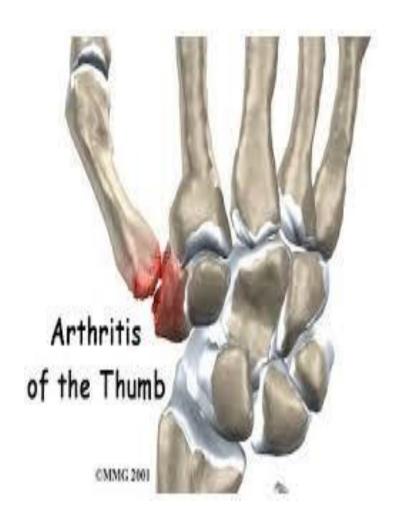
frontal plane

sagittal plane

CMC Joint Arthroplasty









PIP Joint Arthroplasty

