



# 髌置换术后感染全股骨骨质丢失患者 的肢体重建

# 爱尔兰皇家外科医学院

混合骨水泥金属衬旷置用于髋  
关节置换术后感染伴全股骨骨  
量丢失

The Journal of Arthroplasty Vol. 28 No.  
2 2013

**影响因子 : 2.384**

髌置换术后感染全股骨  
骨质丢失患者的肢体重  
建

**Abstract:**Standard treatment for an infected total hip arthroplasty is 2-stage revision. Bone loss in infected total hip arthroplasty presents specific challenges during the first stage. This is especially the case when there is massive or complete loss of the femoral bone stock. We describe a technique successfully used in the setting of total femoral bone loss using a hybrid cement spacer. We describe 2 cases illustrating the technique and perioperative course. This technique is a potential solution for total femoral bone loss that allows the individual to maintain mobility before definitive surgery.

**Keywords:**total femoral bone loss, revision hip, total femoral replacement, infection, 2-stage revision.

# 全髋置换术后感染怎么办？



目前主流的髋关节置换术后感染处理措施分为两个阶段：

**I期**进行感染病灶的清除+术后正规抗生素治疗；

感染完全控制后进行**II期**髋关节翻修。



# 感染+全股骨骨量丢失 怎么办



Although various treatment options have been described for the first- stage procedure with minor to moderate bone loss, there are few reports of managing massive or total femoral bone loss To our knowledge, there are no reports in the literature so far,describing a first- stage revision of an infected proximal femoral endoprosthesis with complete loss of the femur bone due to infection ( Fig. 1 ).

股骨近端假体感染合并股骨远端  
广泛骨质缺损

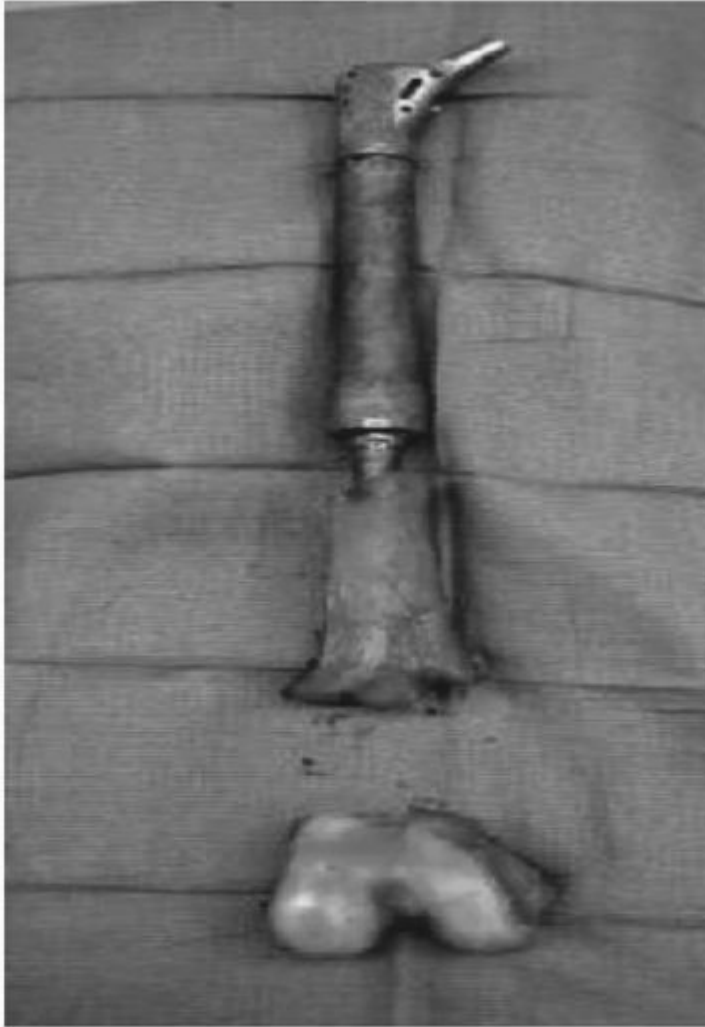


Fig. 1. Infected proximal femur endoprosthesis with grossly infected distal femur.



# Surgical Technique

患者健侧卧位，依据手术主刀医生习惯入路，行后侧入路进入髋关节，后沿大腿外侧向下延伸，经股外侧肌及股中间肌外侧间隙暴露股骨。在手术切口近端，分离阔筋膜张肌后将外侧旋转肌群牵向后方以保护坐骨神经。注意二次手术时的坐骨神经可能和疤痕组织粘连，需特别小心。

在大腿侧，使用钝性Hohmann拉钩将股外侧肌牵向前方。在进行股外侧肌及股中间肌分离时需要小心结扎肌间血管减少术中出血。切口延伸至膝关节部位时采用前外侧入路进入膝关节，切除交叉韧带，侧副韧带，半月板等。游离股骨远端的肌肉止点。完整切除假体及残余的远端股骨。切除软组织进行细菌学培养。在进行膝关节部位骨块切除时需注意对伸膝装置进行保护。

切除髋关节假体及残余股骨骨块后进行软组织的彻底清创，为放置混合型全股骨假体金属衬（hybrid total femoral replacement spacer）做准备。金属衬（spacer）由两部分组成：光滑的髋关节股骨柄假体（GPCS髋关节假体系统）；股骨髓内钉（IMN，Trogen 髓内钉系统），如图2所示。若患者髋臼部位同时出现骨质丢失，则进行臼杯更换。



Fig. 2. CPCS stem and cannulated IMN construct.

图2：CPCS股骨柄+股骨髓内钉装置



以上内容仅为本文档的试下载部分，为可阅读页数的一半内容。如要下载或阅读全文，请访问：<https://d.book118.com/627046016103010005>