

World Bulletin of Public Health (WBPH) Available Online at: https://www.scholarexpress.net Volume-32, March 2024 ISSN: 2749-3644

# EFFECTIVENESS OF METHODS FOR TREATING INTRA-ARTICULAR FRACTURES OF THE DISTAL END OF THE **THIGH BONE**

### Temurov Alisher Akmaljon ugli

Faculty of post -diploma education asisstent of the Department of Traumatology-orthopedics, neurosurgery and ophthalmology

Samarkand State Medical University

## **Shamsiev Jasur Zafarovich**

Faculty of post –diploma education asisstent of the Department of Traumatology-orthopedics, neurosurgery and

ophthalmology Samarkand State Medical University

Ziyotov Lazizjon Izzatilla ugli

Clinical ordinator of the Department of Traumatology –orthopedics, neurosurgery and ophthalmology, Faculty of post-

diploma education

Samarkand State Medical University

#### Nurumov Sarvar Yokub ugli

Clinical ordinator of the Department of Traumatology -orthopedics, neurosurgery and ophthalmology, Faculty of post-

diploma education

Samarkand State Medical University

#### Musurmonov Urol Fozil ugli

Clinical ordinator of the Department of Traumatology -orthopedics, neurosurgery and ophthalmology, Faculty of postdiploma education

Samarkand State Medical University

Article history:	Abstract:
Received:January 11th 2024Accepted:March 7th 2024	To study the comparative results and evaluate the effectiveness of osteosynthetic methods used in intra-articular fractures

#### **Keywords:**

**INTRODUCTION.** Fractures from the hip distal end account for 4-8% of all total skeletal bone fractures. The development of surgical technologies, despite the perfection of implants, unsatisfactory results are encountered. This condition reduces the possibility of using internal osteosynthesis with simple fixators in addition to the biomechanical properties of the son distal end. Also, the cambala muscle is attached to the distal part of the thigh, causing secondary displacement in the fractures. In addition, in these fractures, the subcutaneous blood vessels of the knee cause jarochate, thrombosis and ischemic disorders in the peripheral parts. It is impossible to treat these fractures in a conservative way, requiring the joint to be straightened to its anatomically precise location in the pre-fracture and intra-articular fractures. Therefore, it requires the need to use excellent and optimal methods of treating fractures from within the joint.

**RESEARCH OBJECTIVE.** To study the comparative results and evaluate the effectiveness of osteosynthetic methods used in intra-articular fractures.

**RESEARCH MATERIALS:** materials for research 40 patients treated with this type of fracture in the Samarkand branch of the Republican specialized scientific and practical Medical Center for Traumatology and orthopedics were taken as medical history, rengteng images, computed tomography, MSKT and UTT examinations and carried out in-depth statistical analysis.

19 of the patients (47.5%) were female and 21 (52.5%) were male. In 23 of the injured patients(57.5%), the distal end of the right thigh bone was observed to be injured by a fracture from within the joint, while in 17 (42.5%) left-sided injury was observed. The age of injured patients ranges from 24 to 78 years, with an average age of 48. Tabla\_1

	Distribution of patients by a	age.	
Age	Total	Man	Woman



# World Bulletin of Public Health (WBPH) Available Online at: https://www.scholarexpress.net Volume-32, March 2024 ISSN: 2749-3644

Total	40	21	19
	3	0	3
71 years and older			
61-70 years old	4	2	2
51-60 years old	13	6	7
41-50 years old	11	6	5
31-40 years old	7	5	2
24-29 years old	2	2	0

**RESEARCH RESULTS.** The patients in our observation were divided into two clinical groups, the methods of their treatment and the results of treatment were estimated and compared. At the same time, special attention was paid to the complications observed in patients in comparable clinical groups. Patients in the first clinical group were treated with an angular plate of distal end fractures of the thigh bone, and patients

treated with other types of osteosynthesis methods were included in the second group. The first clinical group was assessed using a special scale KSS (Kpee Society Scores), the observation of 6.9.12 months during the duration of treatment. According to him, the recovery of the full physical condition of patients injured from the inside of the joint at the distal end of the thigh bone certainly increased and improved over time.

Table-2

Results	Number of patients	Percentage
Unsatisfactory	1	5%
Satisfactory	1	5%
Good	2	10%
Aal	16	80%
Total	20	100%

On the KSS scale, patients were examined and evaluated in an examination a year later. According to him, unsatisfactory - 1 patient 5%, satisfactory – 1 patient 5%, Good-2 patients 10%, and an excellent result was observed in 16 patients, that is, in 80% of patients. (Table-3)



World Bulletin of Public Health (WBPH) Available Online at: https://www.scholarexpress.net Volume-32, March 2024 ISSN: 2749-3644

Table-3

An individual survey was conducted for patients forming the second clinical group and evaluated the functional results of treatment between 6 months and 12 months after osteosynthetic surgeries. The assessment was carried out on the KSS scale, as in the first clinical group, in which the distal end of the thigh bone examined using shuruns, the Illizarov apparatus, which pulled fractures from within the joint itself, and on the example of patients who underwent intarmedullary osteosynthesis. According to him, after 12 months, unsatisfactory on the KSS scale – 10%, satisfactory-5%, good-20%, and excellent results - 65%.(Table-4)

_		
11	Percentage	
5		
	10%	
4		
4	<del>5%</del>	
6	20%	
10		
	65%	
	100%	
		100%

**CONCLUSION.** The distal end of the thigh is considered a relatively optimal option for the use of osteosynthesis over the bone in the treatment of fractures from within the joint, ensuring joint toughness through lateral plates. In such complex fractures, as much as possible, in a fireplace-invasive way, fracture

fragments anatomically ideal recovery serve to start the rehabilitation phase of patients early and return them to labor activity in the short term.

#### LITERATURE USED



- Алсмади Я.М., Солод Э.И., Лазарев А.Ф. [и др.]. Значение выбора конфигурации аппарата наружной фиксации при конверсионном остеосинтезе у пациентов с политравмой // Политравма. – 2021. – № 3. – С. 37-45.
- Апагуни А.Э., Власов А.Ю. Анатомофункциональные результаты различных методов лечения пациентов с повреждениями диафиза и дистальной трети бедренной кости // Кубанский научный медицинский вестник. – 2009. – № 2. – С. 19-21.
- 3. Арзуманов С.В., А.Э. Апагуни. Оперативное лечение переломов дистального отдела бедренной кости с применением двух малых доступов // Травматология и ортопедия России. 2006. № 2(40). С. 23.
- Барабаш А.П., Шпиняк С.П., Барабаш Ю.А. Сравнительная характеристика методов остеосинтеза у пациентов с оскольчатыми переломами диафиза бедренной кости // Травматология и ортопедия России. – 2013. – № 2. – С. 116-124.
- Гилев М. В., Гвоздевич В.Д., Волокитина Е.А., Антониади Ю.В. Анатомия коленного сустава // Учебное пособие – Екатеринбург: ФГБОУ ВО УГМУ Минздрава России, 2016. – 60 с.
- Малышев Е.Е., Воронкевич И.А., Втюрин А.И. Выбор доступа при хирургическом лечении внутрисуставных переломов проксимального отдела большеберцовой кости // Современные проблемы науки и образования. – 2019. – № 2. – С. 127.
- Унгбаев Т.Э., Ходжаев Р.Р., Ступина Н.В. Отдаленные результаты оперативного лечения Т-образных переломов дистального конца бедренной кости // Современные способы лечения повреждений и

заболеваний опорно-двигательного аппарата. - Ташкент, 2019. - С. 87-89.

- Antekeier S.B. Mechanical study of the safe distance between distal femoral fractures site and distal locking screws in anterograde intramedullary nailing / S.B. Antekeier, R.L. Burden, M.J. Voor, C.S. Roberts // J Orthop Trauma. – 2015. – Vol. 19. – P. 693-697.
- Bedes L. External fixation of distal femoral fractures in adults' multicenter retrospective study of 43 patients / L. Bedes, P. Bonnevialle, M. Ehlinger [et al.] // Orthop Traumatol Surg Res. – 2014. – Vol. 100, N 8. – P. 867-872.
- Beltran M.J. Management of distal femur fractures with modern plates and nails: state of the art / M.J. Beltran, J.L. Gary, C.A. Collinge // J Orthop Trauma. – 2015. – Vol. 29, N 4. – P. 165-172.
- Jiamton, C. The safety and feasibility of minimally invasive plate osteosynthesis (MIPO) on the medial side of the femur: a cadaveric injectionstudy / C. Jiamton, T. Apivatthakakul // Injury. – 2015. – Vol. 46, N 11. – P. 2170-2176.
- Steinberg, E.L. A double-plating approach to distal femur fracture: a clinical study / E.L. Steinberg, J. Elis, Y. Steinberg [et al.] // Injury. – 2017. – Vol. 48, N 10.– P. 2260-2265.
- Wang, S.-H. Outcomes of distal femoral fractures treated with minimally invasive plate osteosynthesis versus open reduction internal fixation with combinedlocking plate and interfragmentary screws. / Wang S.-H., Wu C.-C., Li W. T. [et al.]//International Journal of Surgery. – 2019. – Vol. 65. – P. 107-112
- Shamsiev J. Z. Surgical Treatment of Long Bone Fractures in Children with Combined Injuries //Central Asian Journal of Medical and Natural Science. – 2023. – T. 4. – №. 6. – C. 386-388.