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Joint depression in tibial plateau fractures: To bone graft or not to bone graft?

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Abstract

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Tibial plateau fractures with significant joint depression and metaphyseal comminution pose a challenge. In order to prevent the collapse of the articular surface, some authors propose filling the subchondral void created during reduction with bone graft/substitute, which can add further complications. We present two cases of tibial plateau fractures with severe joint depression of the lateral condyle; both treated with a periarticular rafting construct, in one case additional bone substitute was used and in the other case no bone graft/substitute was used; their final outcomes were reported. The treatment of joint depression in tibial plateau fractures using periarticular rafting constructs without bone graft, may be also a valid option, to achieve good final results without the morbidity associated with the use of bone graft/substitutes.

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Mar 2, 2023 — The treatment of **joint depression in tibial plateau fractures** using periarticular rafting constructs without **bone graft**, may be also a valid ...

> [Injury](#). 2023 Mar 2;S0020-1383(23)00184-5. doi: 10.1016/j.injury.2023.02.050.

Online ahead of print.

Joint depression in tibial plateau fractures: To bone graft or not to bone graft?

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Affiliations — collapse

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Joint depression in ...

lateral articular surface of
ized **bone graft** and...

fractures?

Introducción

- **Fracturas de platillo tibial**

- Fracturas articulares
- Poco frecuentes
- Patrones complejos, amplia variabilidad

- **Clasificación:**

- Lo fundamental es analizar el tipo y ubicación del o los trazos para definir tratamiento
- Modelo 3D coloreado <https://www.icuc.net/case-study/5cd33b6770243d7c9f46e665>
- “Lista de problemas”



Introducción

- **Tratamiento**
 - Complejo, particularmente en presencia de depresión articular asociado a conminación metafisaria.
 - Objetivos
 - Restablecer biomecánica articular
 - Prevenir la artrosis post traumática

Introducción



Casos

- Estudio retrospectivo analítico, usando la base de datos ICUC.
- Se identificaron 39 casos con hundimiento articular (AO/OTA 41 B y C) de un total de 63 fracturas de platillo tibial.
 - Con injerto/sustituto óseo n=12
 - Sin injerto/sustituo óseo n=27



- **39** casos con hundimiento articular:
 - **Con** injerto/sustituto óseo **n=12**
 - Placas unicondilares (n=7)
 - Placas bicondilares (n=3)
 - Placa “rim” (n=1)
 - Placa unicondilar + “rim” (n=1)
 - **Sin** injerto/sustituo óseo **n=27**
 - Placas unicondilares (n=21)
 - Placas bicondilares (n=6)
 - Asociación de estructura “rafter” adicional (kw o tornillos)

“Using the link imbedded in this article, the reader will have the ability to review the entire ICUC data base regarding the described clinical topic”

<https://www.icuc.net/expert-opinion/63fe1c6d70243d14aeaa9359>

ICUC score

Functional Limitation according to patient (FL)

- 0** Zero functional limitation. Can do any activity, as before fracture.
- 1** Can do most activities. Some limitations of joint motion. Slight functional impairment.
- 2** Can only do certain activities. Clear limitation of joint motion. Marked functional impairment.
- 3** Unable to do most activities. Poor range of joint motion.
- 4** Unable to do any activity. Stiff joint.

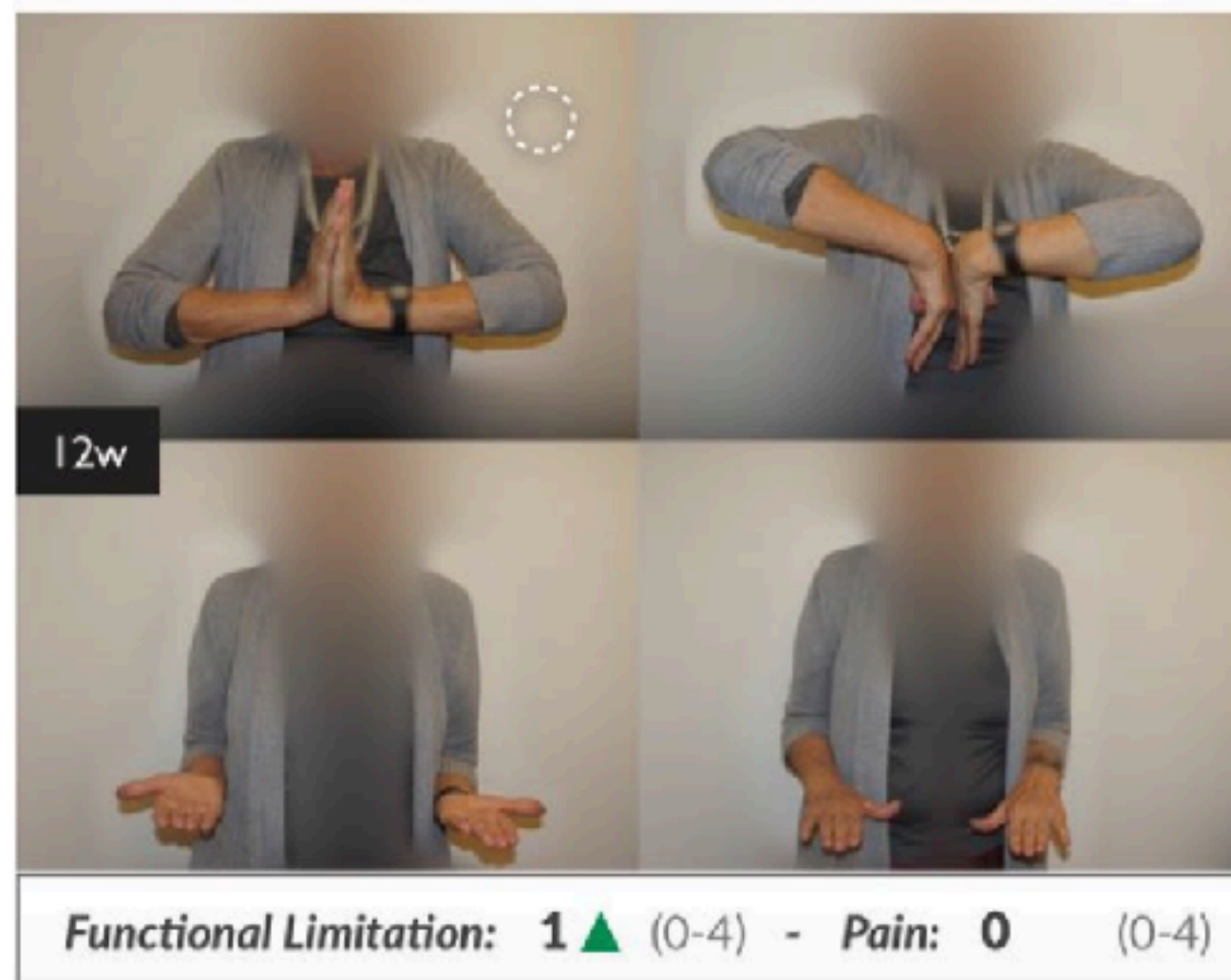
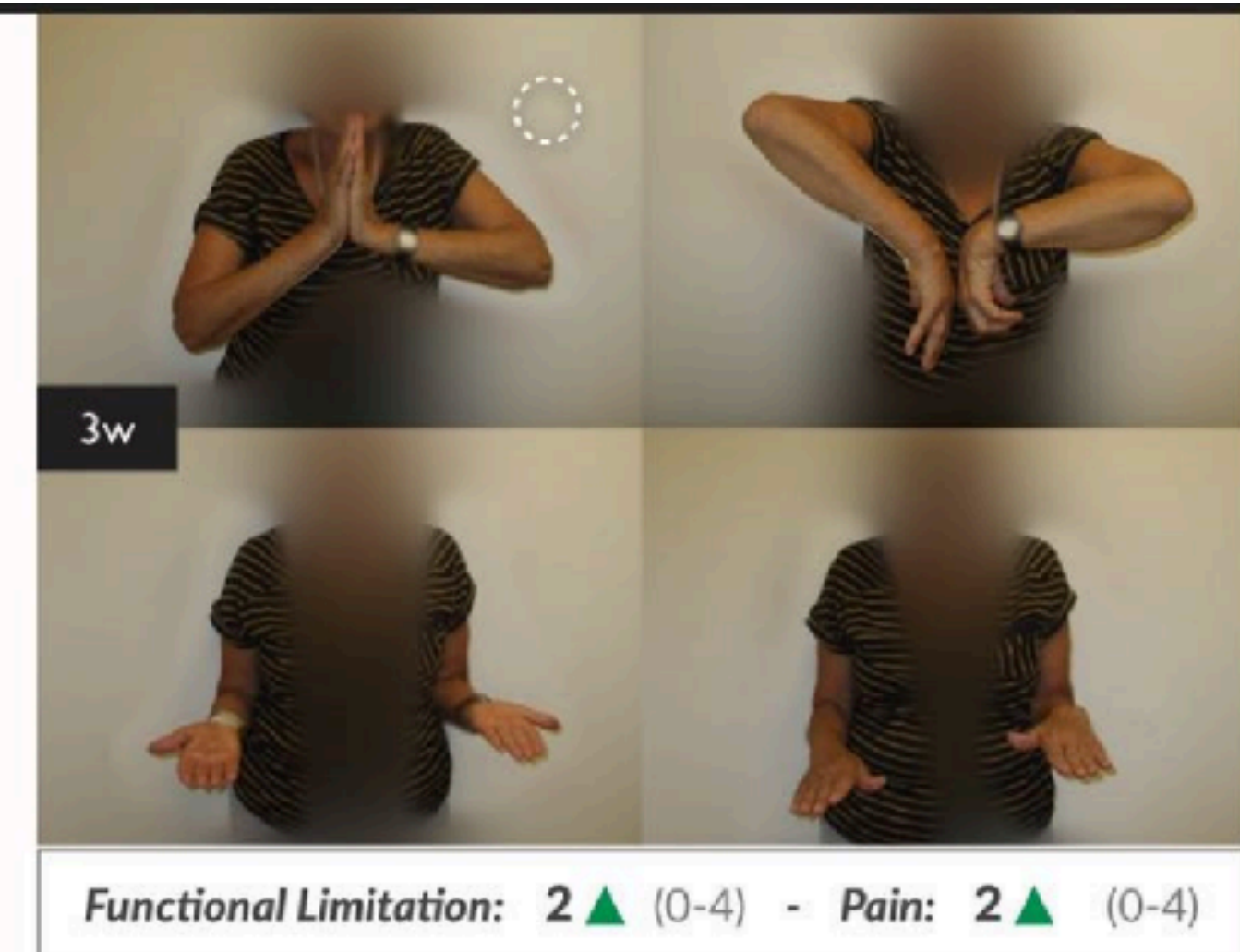
 Improving
  Stable
  Worsening

Pain (P)



 Improving
  Stable
  Worsening

A perfect result is:
Zero limitations and Zero pain



Resultados

Table 1
Outcomes.

#	ID	Void Size	Graft YES/NO	Weeks Follow up	ICUC score	Collapse
1	CA-985	Large	YES	89	-	NO
2	CA-538	Very large	YES	104	FL0 P0	NO
3	CA-111	Very large	YES	0	-	-
4	CA-485	Large	YES	0	-	-
5	PA-779	Very large	YES	12	-	NO
6	PA-042	Very large	YES	45	-	NO
7	PA-689	Large	YES	49	-	NO
8	CA-126	Large	YES	11	-	NO
9	PA-447	Large	YES	12	-	NO
10	PA-236	Large	YES	104	FL0 P0	NO
11	PA-294	Large	YES	0	-	-
12	PA-757	Large	YES	0	-	-
13	CA-449	Very large	NO	119	FL1+ P1+	NO
14	CA-679	Large	NO	125	FL1+ P0	NO
15	CA-335	Large	NO	226	FL2= P1=	NO
16	CA-052	Large	NO	100	FL1+ P0	NO
17	PA-754	Large	NO	52	-	NO
18	PA-250	Very large	NO	42	FL1+ P1+	NO
19	PA-433	Large	NO	14	FL1+ P1+	NO
20	PA-613	Very large	NO	204	FL0 P0	NO
21	PA-328	Very large	NO	55	FL0 P0	NO
22	PA-847	Very large	NO	143	FL1= P1=	NO
23	PA-826	Very large	NO	70	FL1+ P1+	NO
24	PA-673	Very large	NO	13	FL1+ P0	NO
25	PA-435	Very large	NO	44	FL2+ P1=	NO
26	PA-212	Large	NO	60	FL0 P0	NO
27	PA-425	Very large	NO	180	FL1+ P1+ (68w)	NO
28	PA-162	Large	NO	66	FL1+ P0	NO
29	PA-113	Very large	NO	65	FL1+ P1+	NO
30	PA-025	Very large	NO	13	FL2+ P1+	NO
31	PA-379	Large	NO	20	FL1+ P0	NO
32	PA-619	Large	NO	17	FL1+ P0	NO
33	PA-256	Large	NO	0	-	-
34	PA-563	Large	NO	38	FL0 P0 (470w)	NO
35	PA-977	Very large	NO	70	FL1+ P1+	NO
36	PA-640	Very large	NO	69	FL3- P3-	YES
37	CA-544	Very large	NO	23	FL2+ P1+	NO
38	CA-154	Large	NO	10	-	NO
39	PA-353	Large	NO	20	FL1+ P0	NO

Seguimiento: 10-226 semanas

Sin seguimiento: 13 casos

Resultados globales: Buenos

Buen resultado (ICUC score 0-1): **21** casos

- Con sustituto óseo (n=2)
- Sin sustituto óseo (n=19)
- RX sin pérdida de reducción ni colapso articular

Regular resultado (ICUC score 2): 4 casos

- Todos sin sustituto óseo
- RX sin pérdida de reducción ni colapso articular

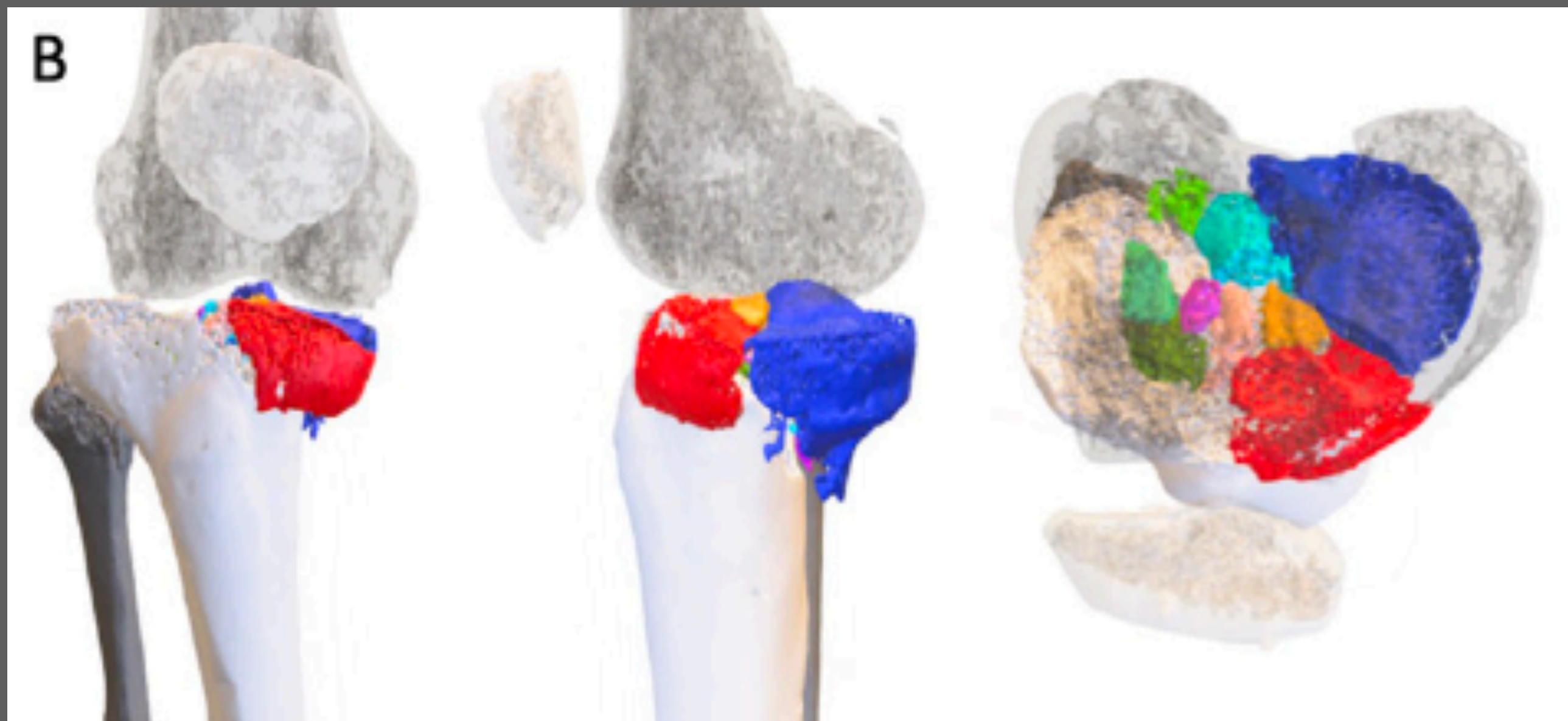
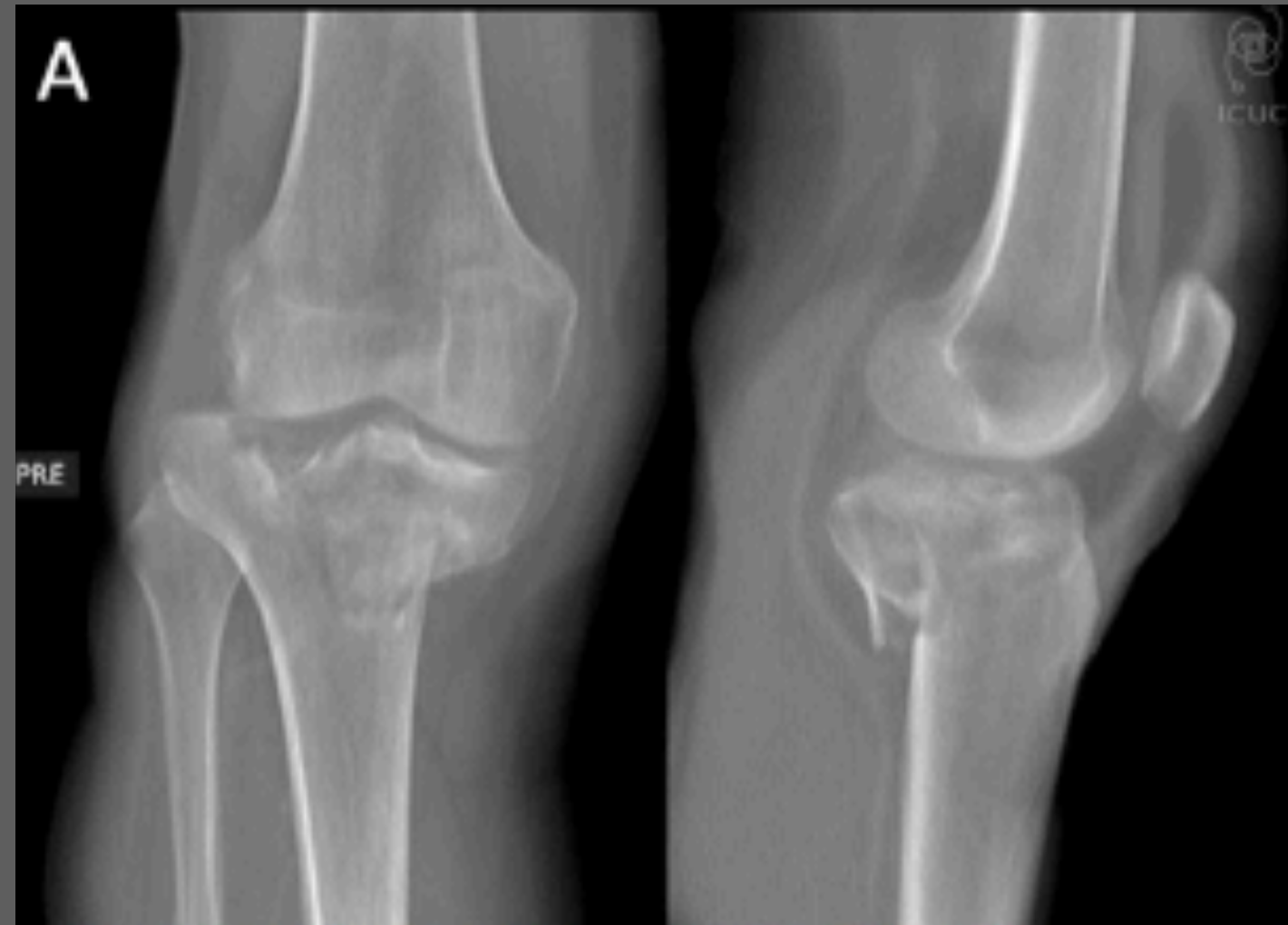
Mal resultado (ICUC score 3): **1** caso (ID: 41-PA-640)

Pérdida de reducción y colapso articular
Sin sustituto óseo

No se reportó infección en ningún caso

Case ID 41-CA-538:

<https://www.icuc.net/case-study/5cd33b6770243d7c9f46e665>



Sexo femenino. 75 años.
Siniestro de tránsito como conductora de auto.
Politraumatizada.

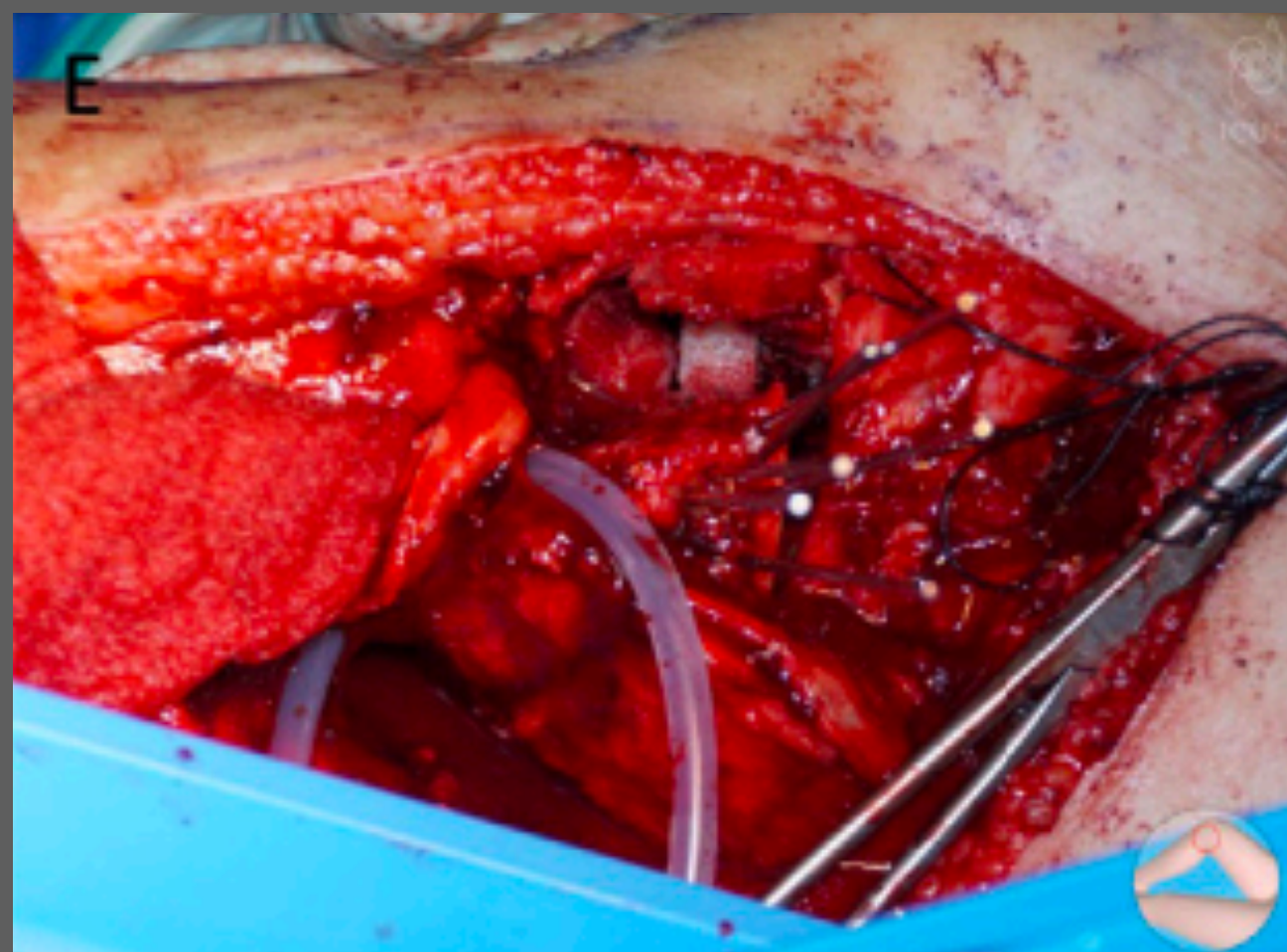
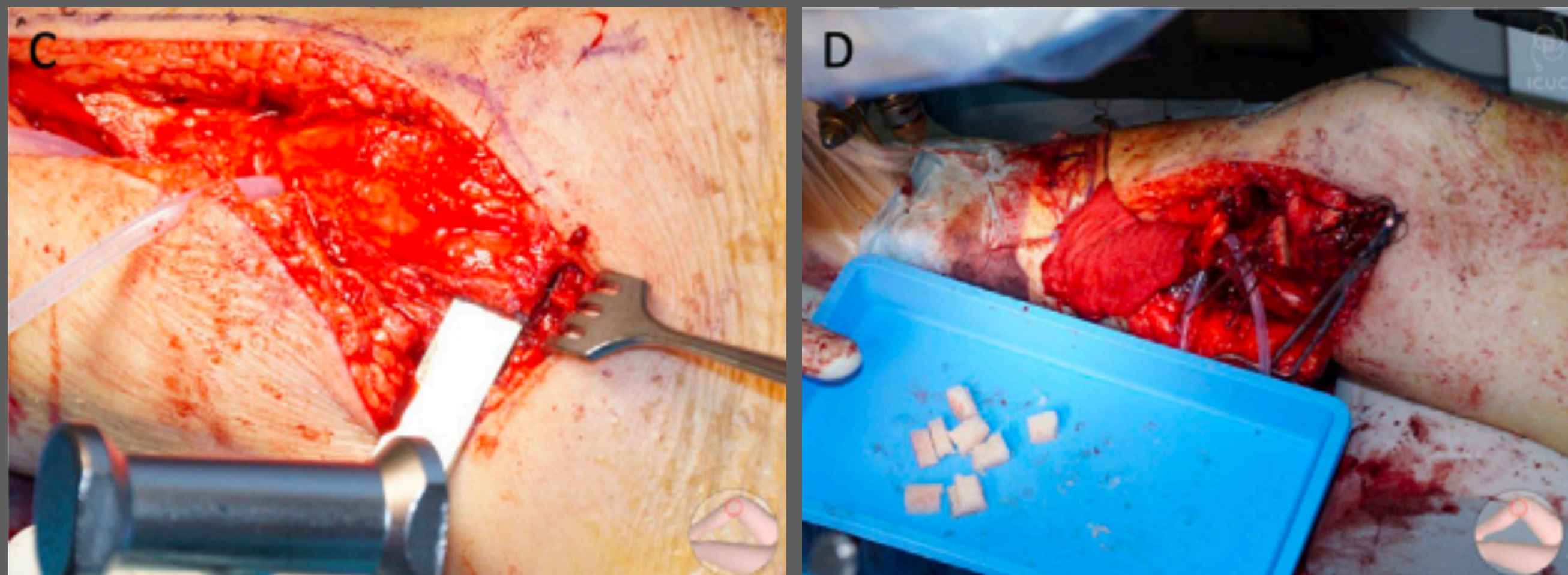
Balance lesional: Fractura de pilón tibial expuesta, fractura cerrada de platillo tibial en miembro inferior derecho y fractura expuesta de antebrazo derecho. ISS = 32.

A. Radiografía simple preparatoria
B. Modelo 3D coloreado interactivo



Case ID 41-CA-538:

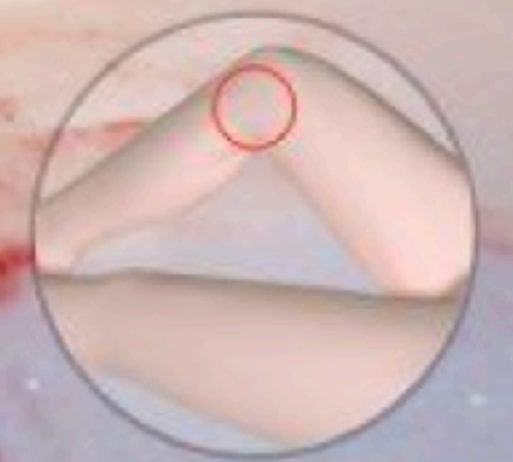
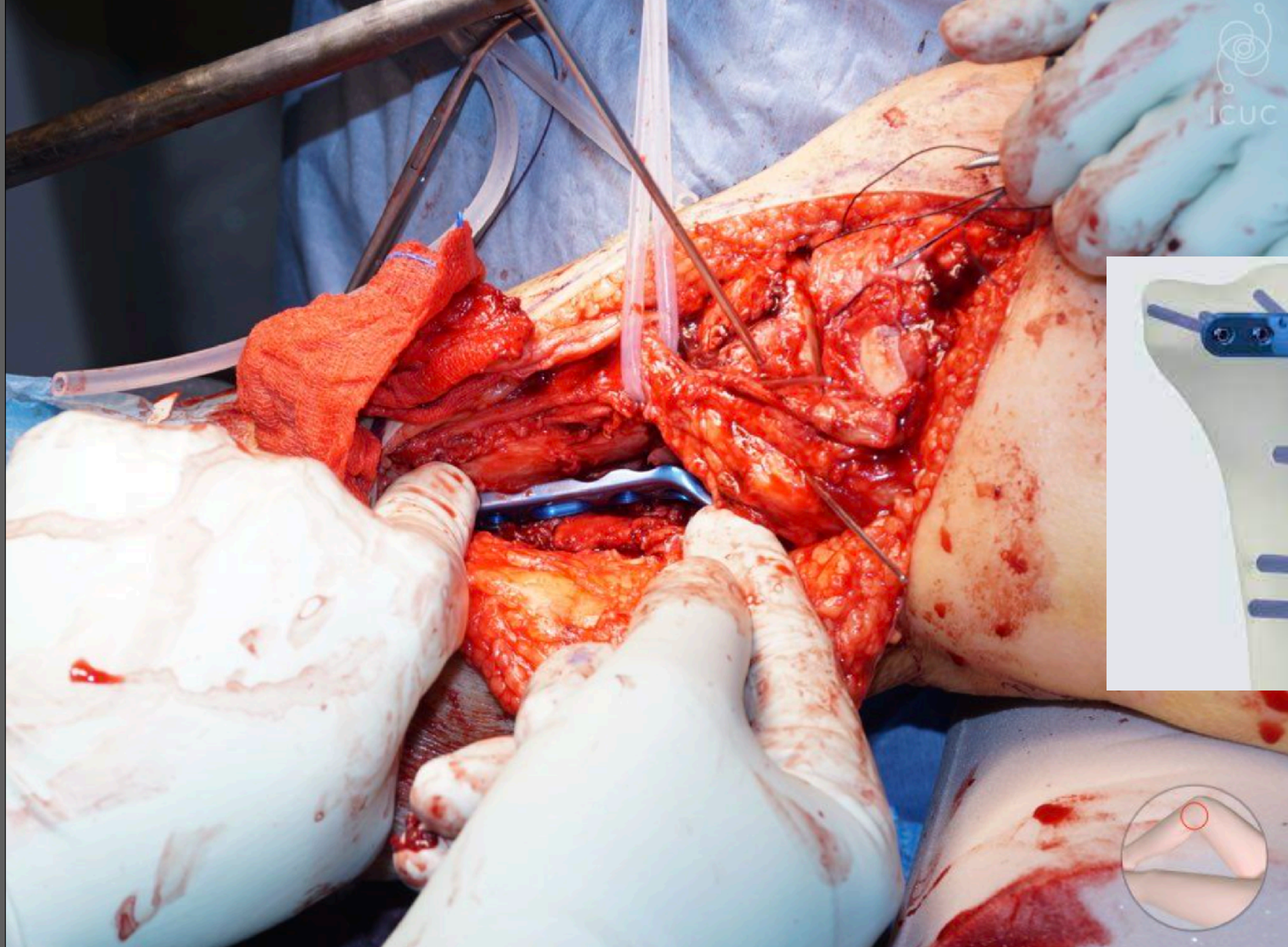
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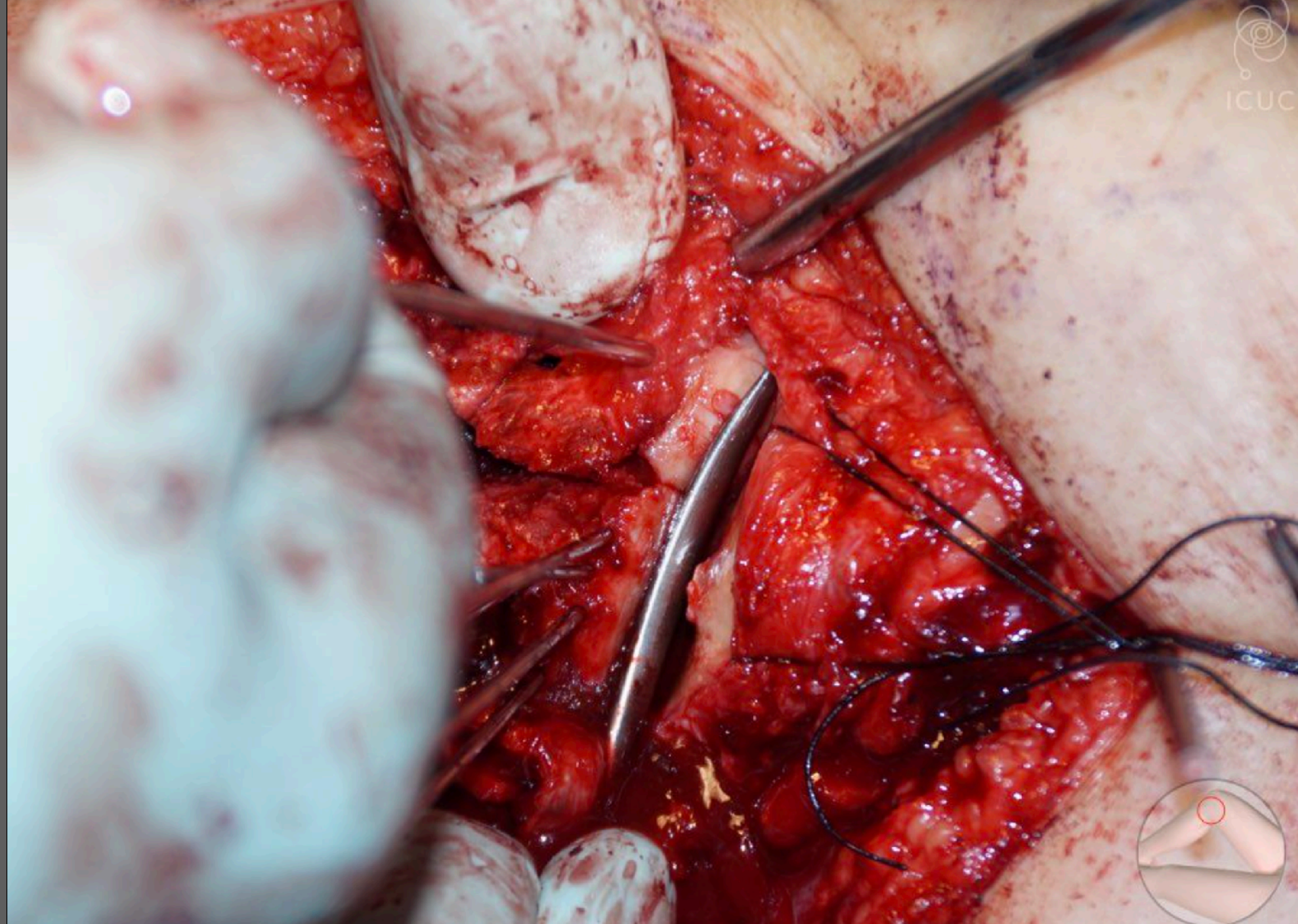


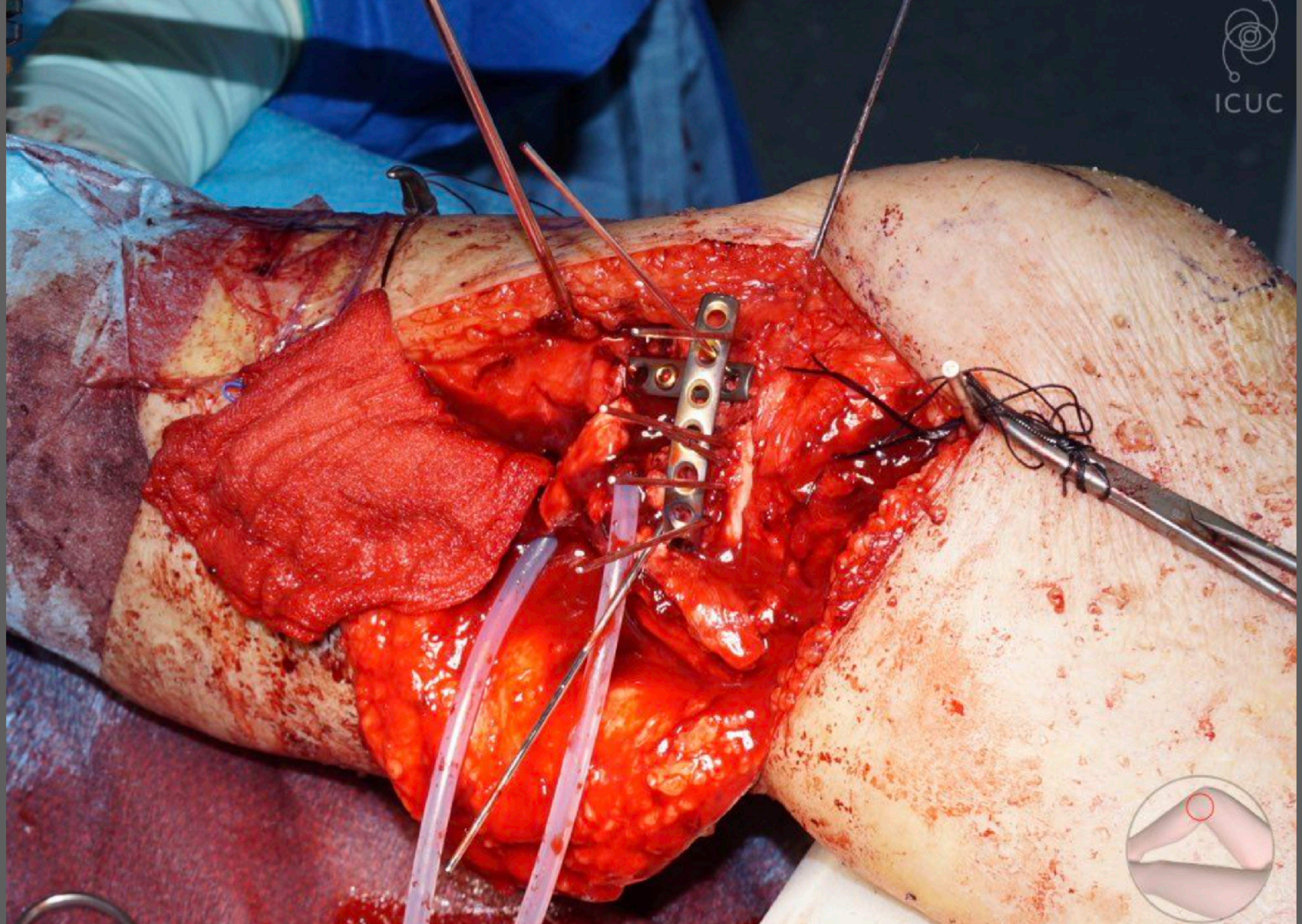
Sexo femenino. 75 años.
Siniestro de tránsito como conductora de auto.
Politraumatizada.

Balance lesional: Fractura de pilón tibial expuesta, fractura cerrada de platillo tibial en miembro inferior derecho y fractura expuesta de antebrazo derecho. ISS = 32.

C, D, E. Imágenes intraoperatorias.





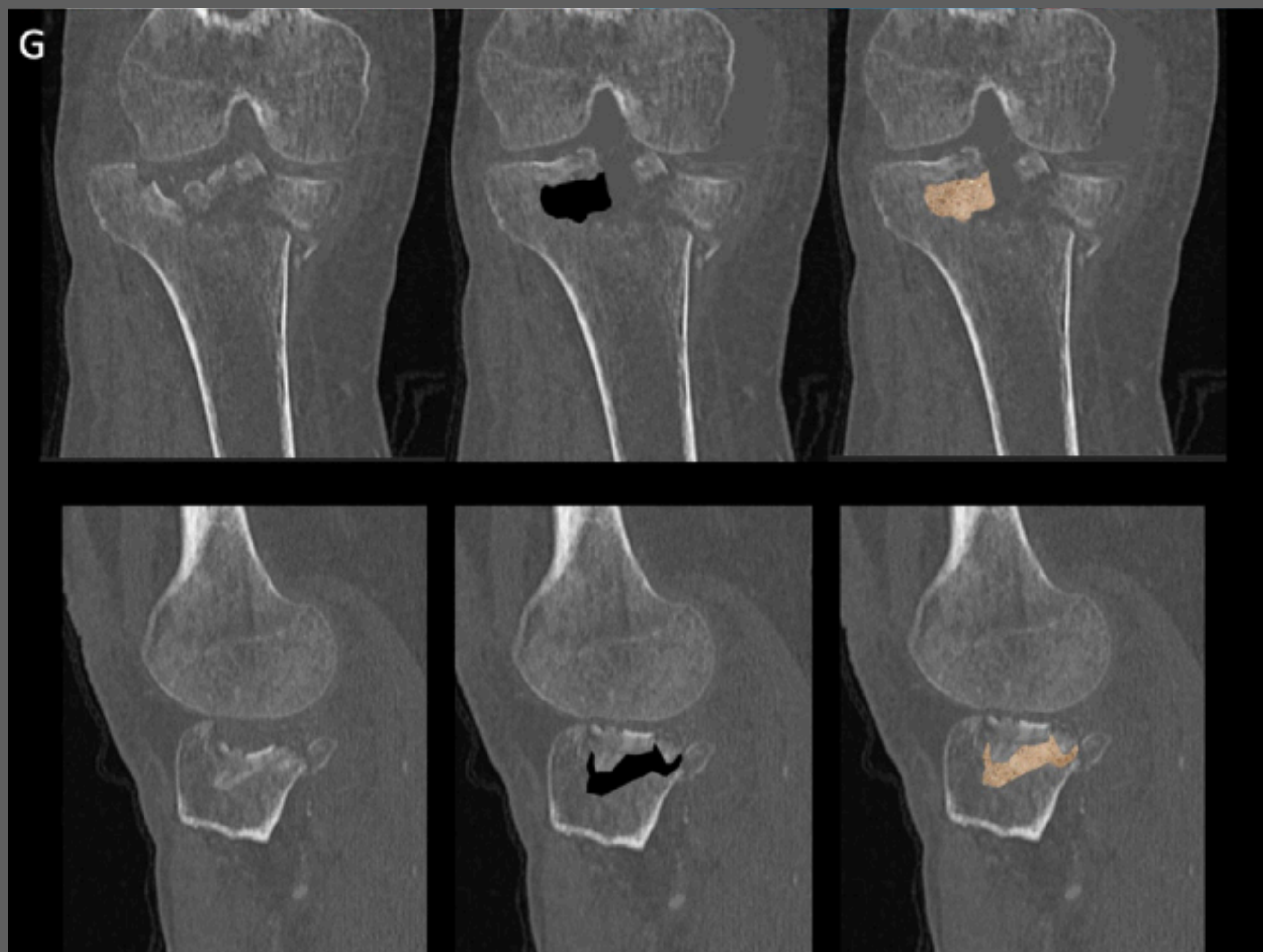


0w



Case ID 41-CA-538:

<https://www.icuc.net/case-study/5cd33b6770243d7c9f46e665>



Sexo femenino. 75 años.
Siniestro de tránsito como conductora de auto.
Politraumatizada.

Balance lesional: Fractura de pilón tibial expuesta, fractura cerrada de platillo tibial en miembro inferior derecho y fractura expuesta de antebrazo derecho. ISS = 32.

G. Defecto subcondral post reducción

Case ID 41-CA-538:

<https://www.icuc.net/case-study/5cd33b6770243d7c9f46e665>



Sexo femenino. 75 años.
Siniestro de tránsito como conductora de auto.
Politraumatizada.

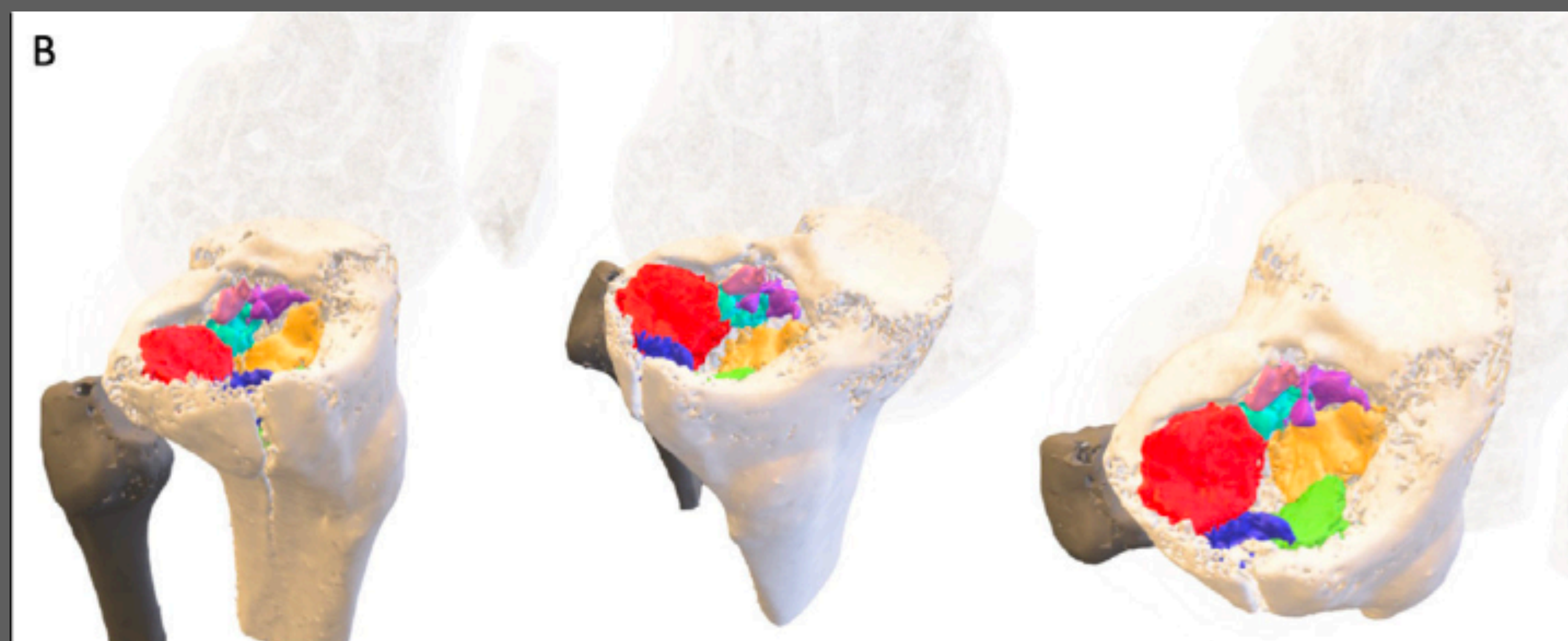
Balance lesional: Fractura de pilón tibial expuesta, fractura cerrada de platillo tibial en miembro inferior derecho y fractura expuesta de antebrazo derecho. ISS = 32.

H. Radiografía de control a las 29 semanas.

ICUC score telefónico a las 104 semanas FL 0 D0.

Case ID 41-CA-977:

<https://www.icuc.net/case-study/60789b0b70243d46a5afbb3d>



Sexo masculino. 55 años.

Fractura cerrada de platillo tibial miembro inferior derecho.

Lesión aislada.

A. Radiografía simple preparatoria

B. Modelo 3D coloreado interactivo

Case ID 41-CA-977:

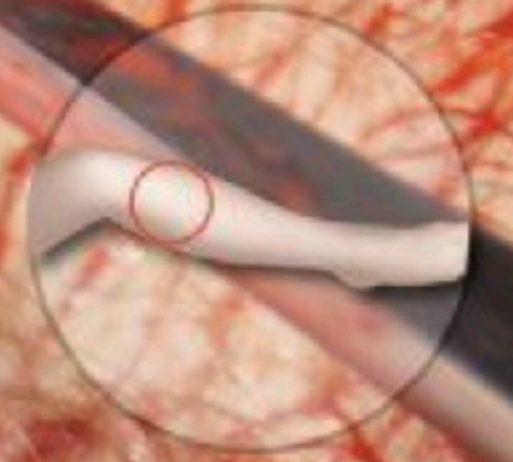
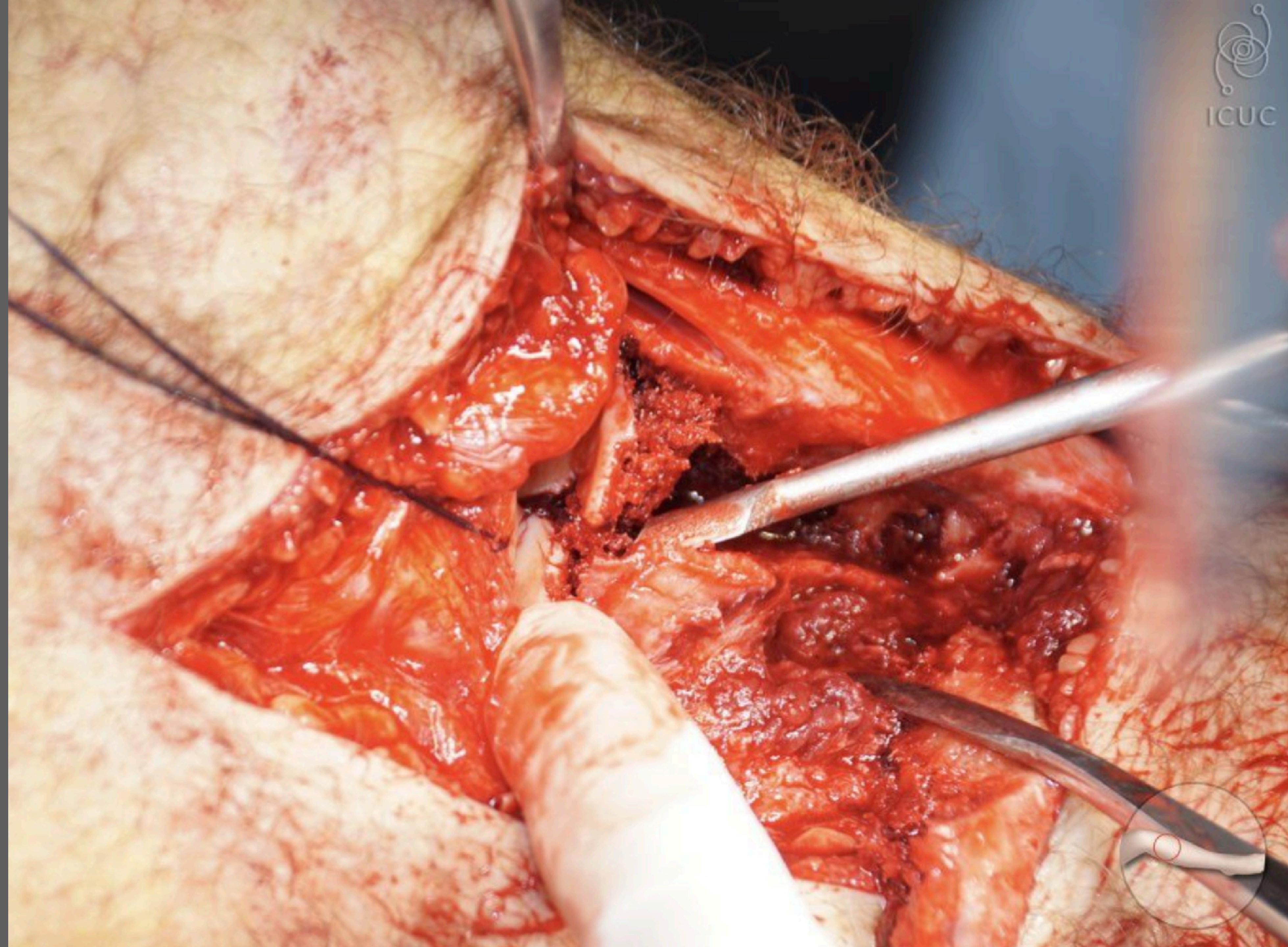
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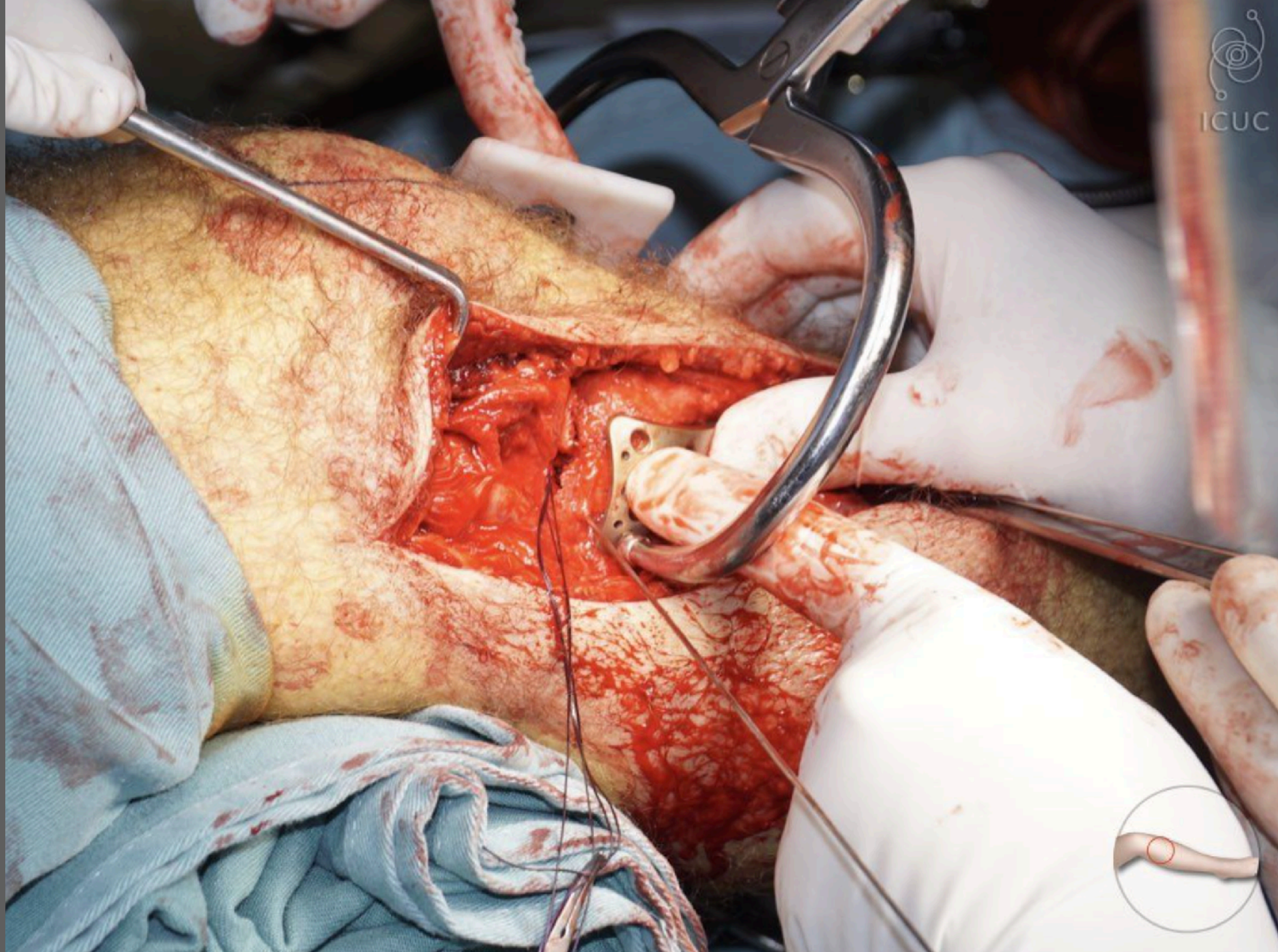


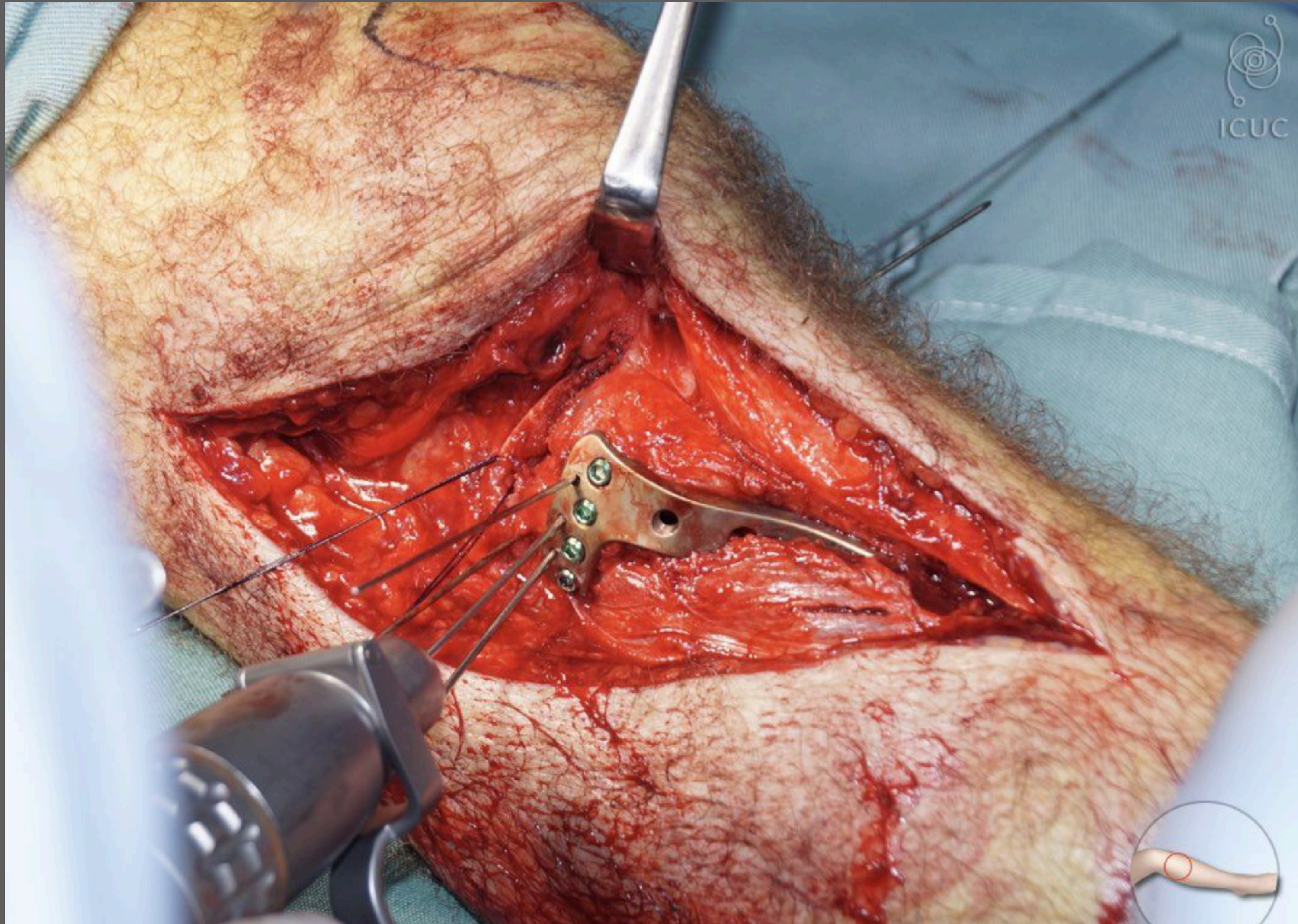
Sexo masculino. 55 años.
Fractura cerrada de platillo tibial miembro inferior derecho.

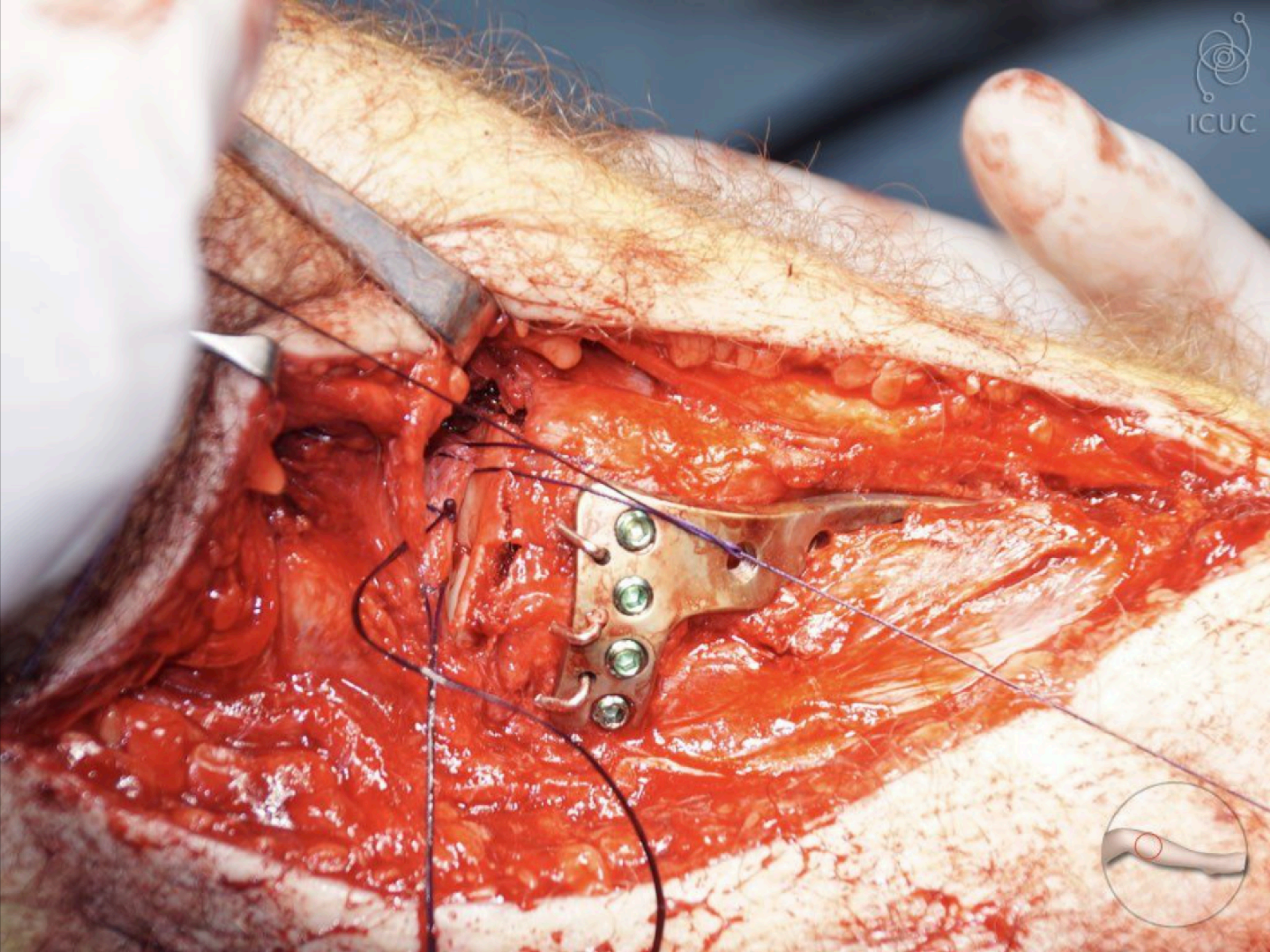
Lesión aislada.

Imágenes intraoperatorias.



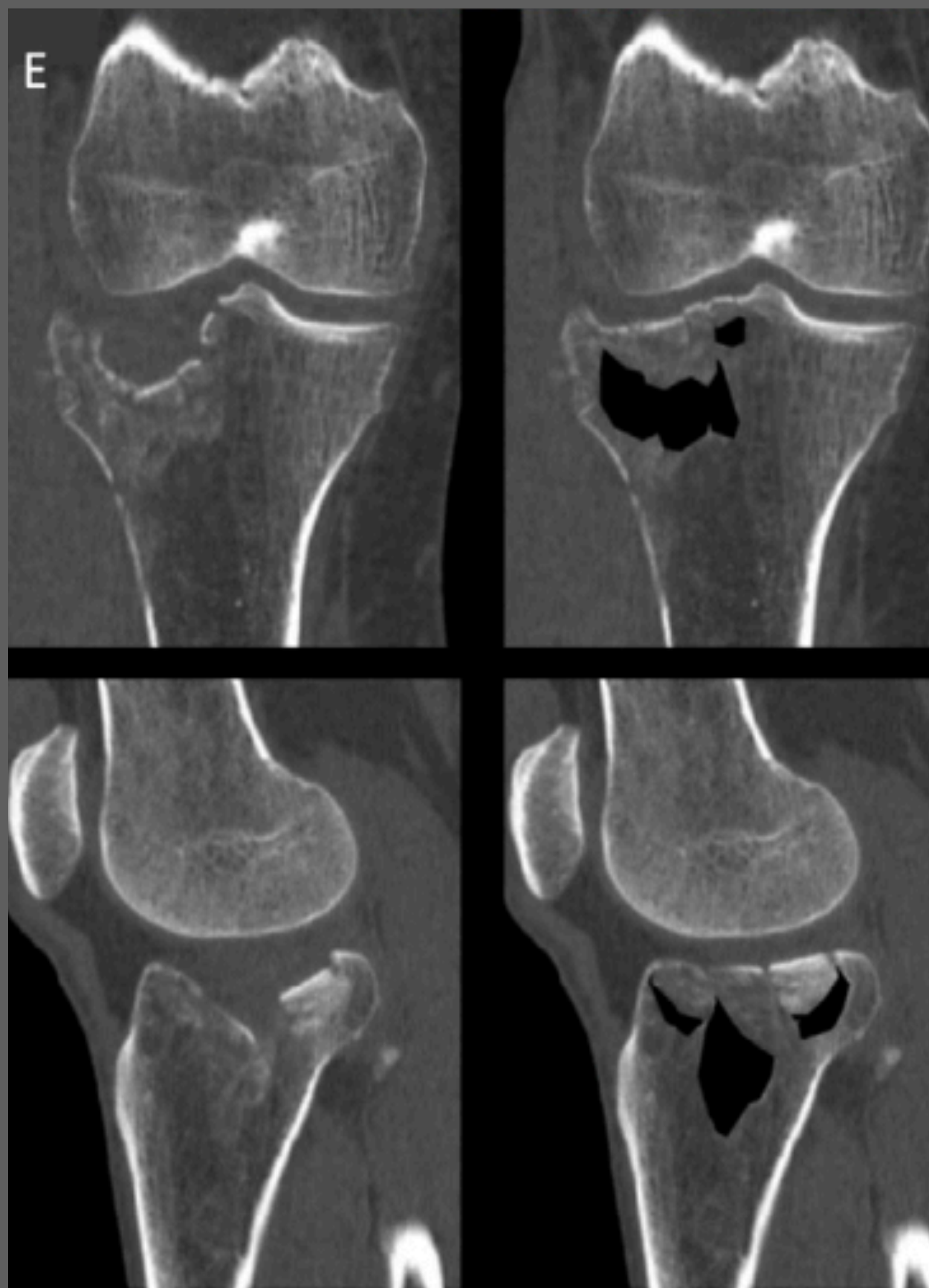






Case ID 41-CA-977:

<https://www.icuc.net/case-study/60789b0b70243d46a5afbb3d>



Sexo masculino. 55 años.

Fractura cerrada de platillo tibial miembro inferior derecho.

Lesión aislada.

E. Defecto subcondral post reducción

Case ID 41-CA-977:

<https://www.icuc.net/case-study/60789b0b70243d46a5afbb3d>



Sexo masculino. 55 años.

Fractura cerrada de platillo tibial miembro inferior derecho.

Lesión aislada.

F. Radiografía de control a las 70 semanas.

Case ID 41-CA-977:

<https://www.icuc.net/case-study/60789b0b70243d46a5afbb3d>



Sexo masculino. 55 años.
Fractura cerrada de platillo tibial miembro inferior derecho.

Lesión aislada.

ICUC score a las 70 semanas: **FL1 = D1+**.

70w



Consideraciones finales

- Aunque se recomienda el uso de injerto óseo o sustituto, la fijación interna utilizando un montaje “rafter” periarticular sin injerto óseo o sustituto óseo para fracturas de meseta tibial proximal con hundimiento también puede lograr buenos resultados.



I think here with the proximal tibia we don't need to worry about too much.

We have a basic question as a good research approach “Does bone graft make a difference?” And we don't have the answer, but we have enough data to show that it may or may not help.

J. Jupiter, July, 2022.

Injury International Journal of the Care of the Injured

