

## Anterior Dislocation of Hip with Ipsilateral Fracture Neck of Femur - A Rare Presentation

Sunil kumar<sup>1</sup>, Anil kumar Srivastava<sup>2</sup>, Vinit Jaiswal<sup>2</sup>, Javed Ali<sup>3</sup>

<sup>1</sup>. Associate Professor, Dept. Of Orthopaedic Surgery. U.P. Rural Institute of Medical Sciences & Research, Saifai, Etawah, (U.P.). India.

<sup>2</sup>. Senior Resident, Dept. Of Orthopaedic Surgery. U.P. Rural Institute of Medical Sciences & Research, Saifai, Etawah, (U.P.). India.

<sup>3</sup>. Junior Resident, Dept. Of Orthopaedic Surgery. U.P. Rural Institute of Medical Sciences & Research, Saifai, Etawah, (U.P.). India.

**Abstract:** A 55 year old male patient presented to us with compliant of injury over left hip as a result of slip over ground. After trauma he was unable to stand and walk. On physical examination his left lower limb was externally rotated, flexed, adducted & shortened. There was a huge swelling present over groin region of left side. Skiagram and CT scan revealed anterior dislocation of hip with ipsilateral fracture neck of femur left side. Traumatic anterior dislocation of hip with ipsilateral fracture neck of femur is rare. This rare presentation was subsequently managed by arthroplasty and is reported.

### I. Introduction

Anterior dislocation of hip accounts for 10 -12 % of all traumatic hip dislocations. Anterior dislocation of hip with ipsilateral fracture of femoral neck is rare (2,4,5,7,8). According to Epstein anterior dislocation of hip is result of forceful abduction and neck or trochanter impinges over posterior rim of acetabulum which tends to force the femoral head forward through anterior capsule. If hip is in an concomitant position of flexion an obturator dislocation may occur. If the hip is extended pubic type results (3). If the force is not dissipated, then it causes a complex break in the continuity of the neck (7).

### II. Case Report

A 55 year old male patient admitted in February 2014 having history of slip on ground. Following trauma patient was unable to bear weight on his left lower limb. On clinical examination, left lower limb was externally rotated; flexed, adducted & grossly shortened Swelling on left groin was noticed. Bony hard globular mass was palpable in groin on left side. No neurovascular deficit seen.

Skiagram and CT Scan confirmed an anterior dislocation of left hip with sub capital fracture of femoral neck (fig. 1 & 2).

An antero-lateral approach (Hardinge approach) was used and head was found anteriorly. A Hip arthroplasty was done. Post-operative course was uneventful (fig.-3).



FIG 1- Skiagram of pelvis with anterior dislocation of left hip with sub-capital fracture

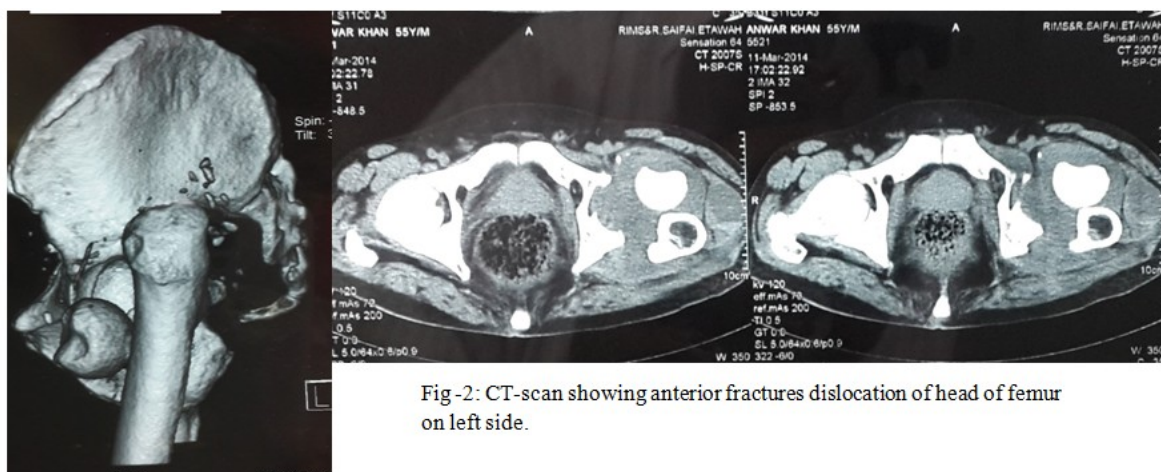


Fig-2: CT-scan showing anterior fractures dislocation of head of femur on left side.



FIG 3- Post –operative skiagram showing bipolar prosthesis left side

### III. Discussion

Anterior dislocation of hip are uncommon and according to Epstein, constitute only 10- 12 % of traumatic hip dislocation. However anterior dislocation of hip with associated fracture of femoral head(1,3,5,6,8) or fracture of neck (2,4,5,7,9) is rare entity.

In literature an antero-inferior dislocation with ipsilateral femoral neck fracture reported by Hart was treated with Whitman reconstruction procedure (4). Sadler & Distefano reported an anterior dislocation of hip with an ipsilateral basi-cervical fracture which was reduced and fixed with a hip screw & plate. Unfortunately their patient developed avascular necrosis (7), which was treated with pedicle grafting. McClelland et al. reported another case with dislocation of the obturator type with ipsilateral fracture of femoral head & neck treated with a collarless press-fit bipolar prosthesis (5).

Dummer & Sanzana reported a similar case associated with sub-capital fracture treated by uncemented total hip arthroplasty (2). In our case there is anterior dislocation of hip with ipsilateral fracture of femoral neck. Articular surface of acetabulum was intact without any damage/ abrasions, so we performed a cemented bipolar hemi-arthroplasty (fig 3).

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