

FRACTURES OF THE FIBULA ABOVE THE LOWER TIBIOFIBULAR SYNDESMOSIS

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Fractures of the ankle are common injuries. According to Lauge Hansen's classification, there are five types of ankle fractures. In certain types of fractures tibiofibular syndesmosis injury occurs, a fracture of the fibula above the syndesmosis and a fracture of the medial malleolus or a rupture of the deltoid ligament, and these types are: supination-eversion (SE), pronation-eversion (PE) and pronation-abduction (PA).

We presented a group of 46 patients who were treated at the Department of Orthopedic Surgery and Traumatology due to the ankle fracture and rupture of the distal tibiofibular syndesmosis. All underwent surgery immediately after the injury, on average, 28 hours after the injury occurred when osteosynthesis of malleolus and transfixation of syndesmosis with spongiosum screw placed above it were performed. Postoperatively, we placed a plaster splint, which was worn for 3 weeks, and support on the injured leg was banned for up to 6 weeks. After removing the plaster, all patients were included in physical therapy. Osteosynthesis material was removed after 6 months.

We have evaluated the results of the treatment according to the Olerud and Molander score. By tracking the subjective and objective signs we have acquired the following results: in the group of excellent and good results there were 34 (73.9%) patients, in the group of satisfactory, there were 7 (15.2%), in the group with poor results there were 5 (10.9%) patients.

Lateral malleolus and tibiofibular syndesmosis are key to the anatomical reduction of displaced fractures, and restoring the integrity of the lateral malleolus establishes stability of the ankle.

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