

Mechanics of intramedullary fixation

Nail design

Tasks

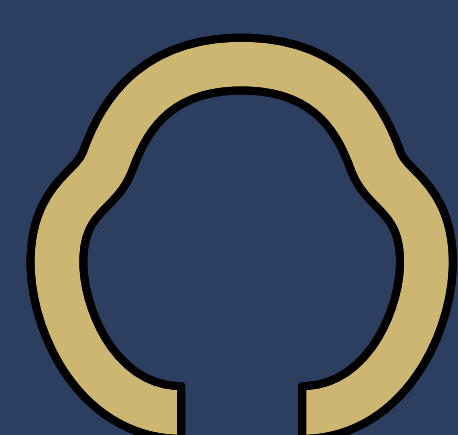
Examine various nail designs;
discuss the advantages and
disadvantages of each

Learning outcomes

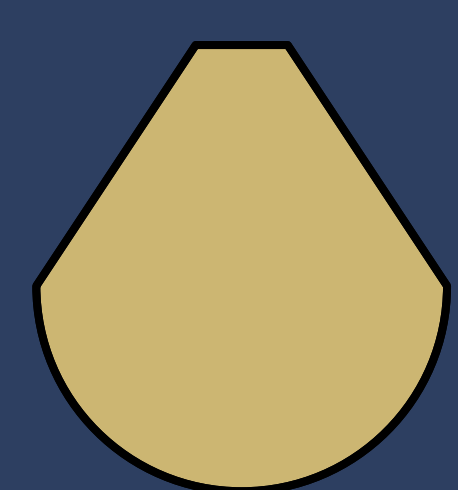
- Describe different nail designs and their mechanical characteristics
- Explain radial preload and corresponding concept of stabilization

Take-home message

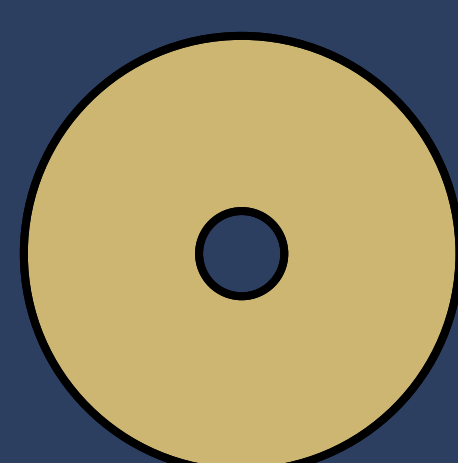
Nail designs



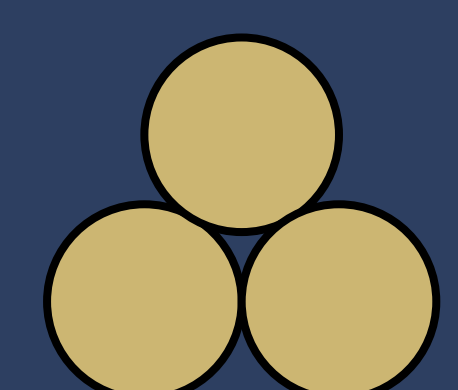
Slotted nail with
cloverleaf section



Solid nail



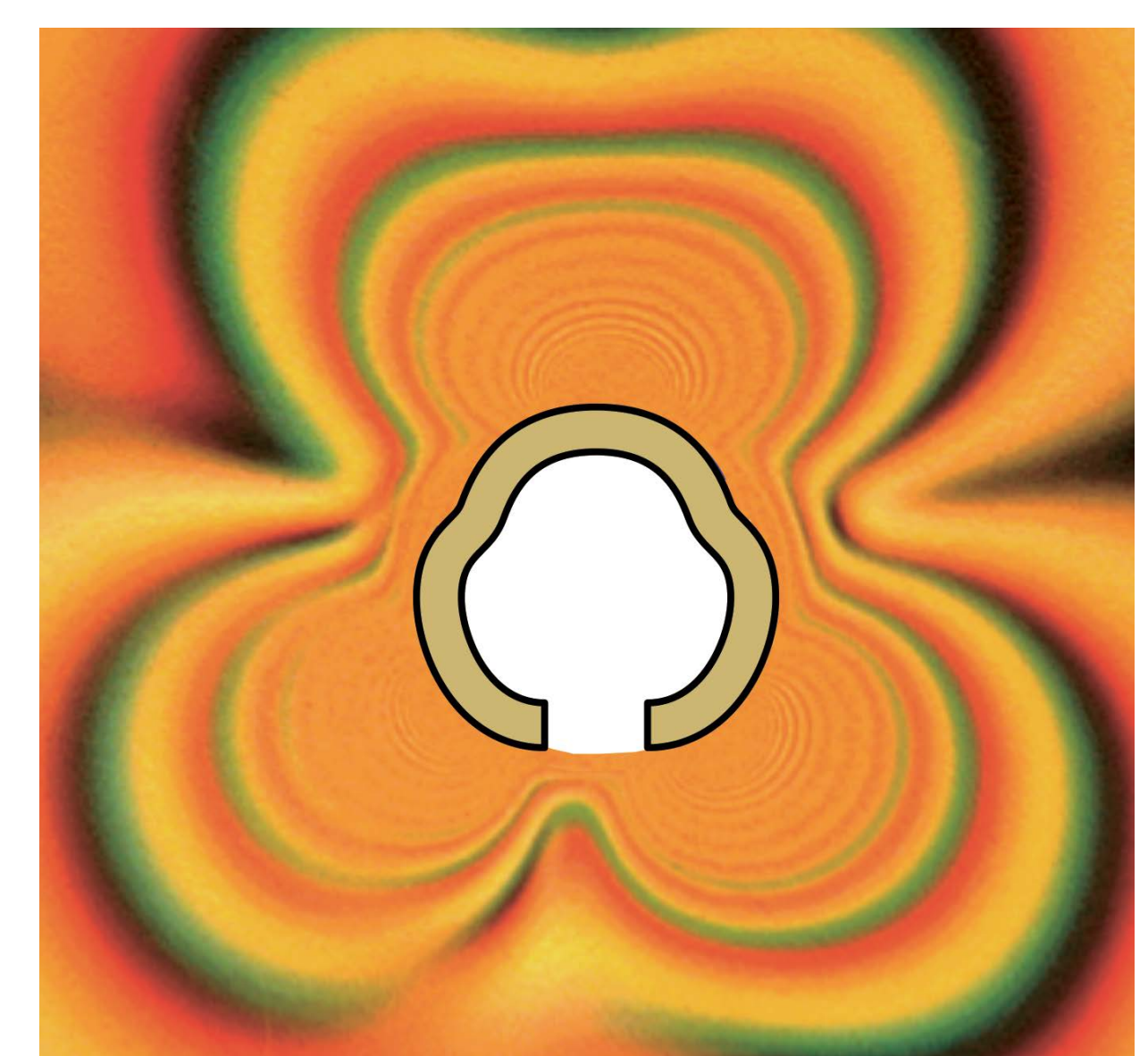
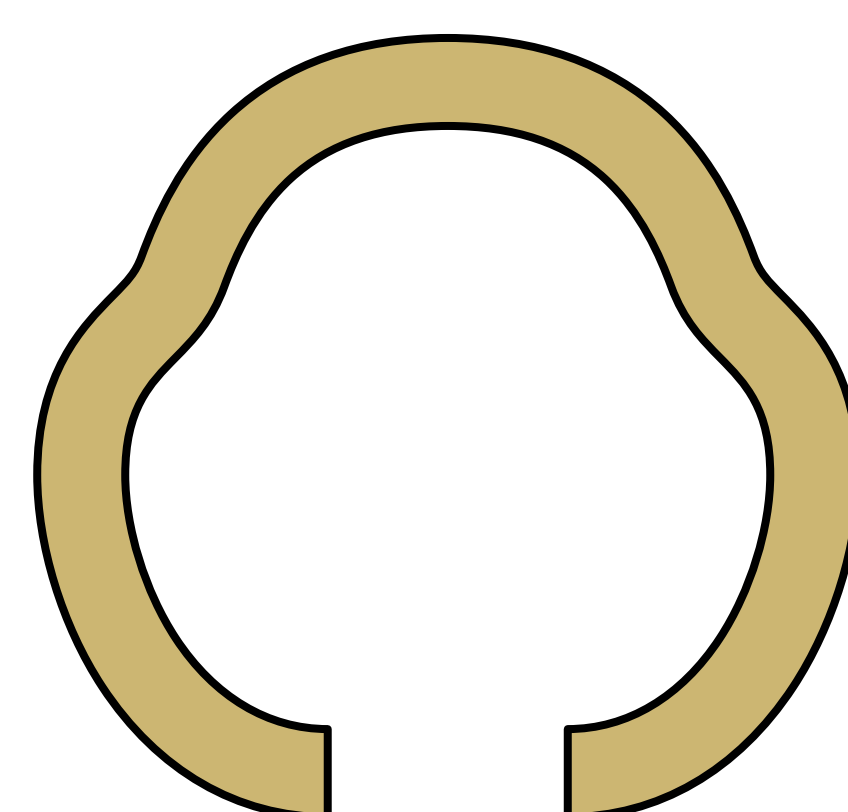
Cannulated nail



Elastic nails

Connection of nail to bone with radial preload needs

Slotted nail

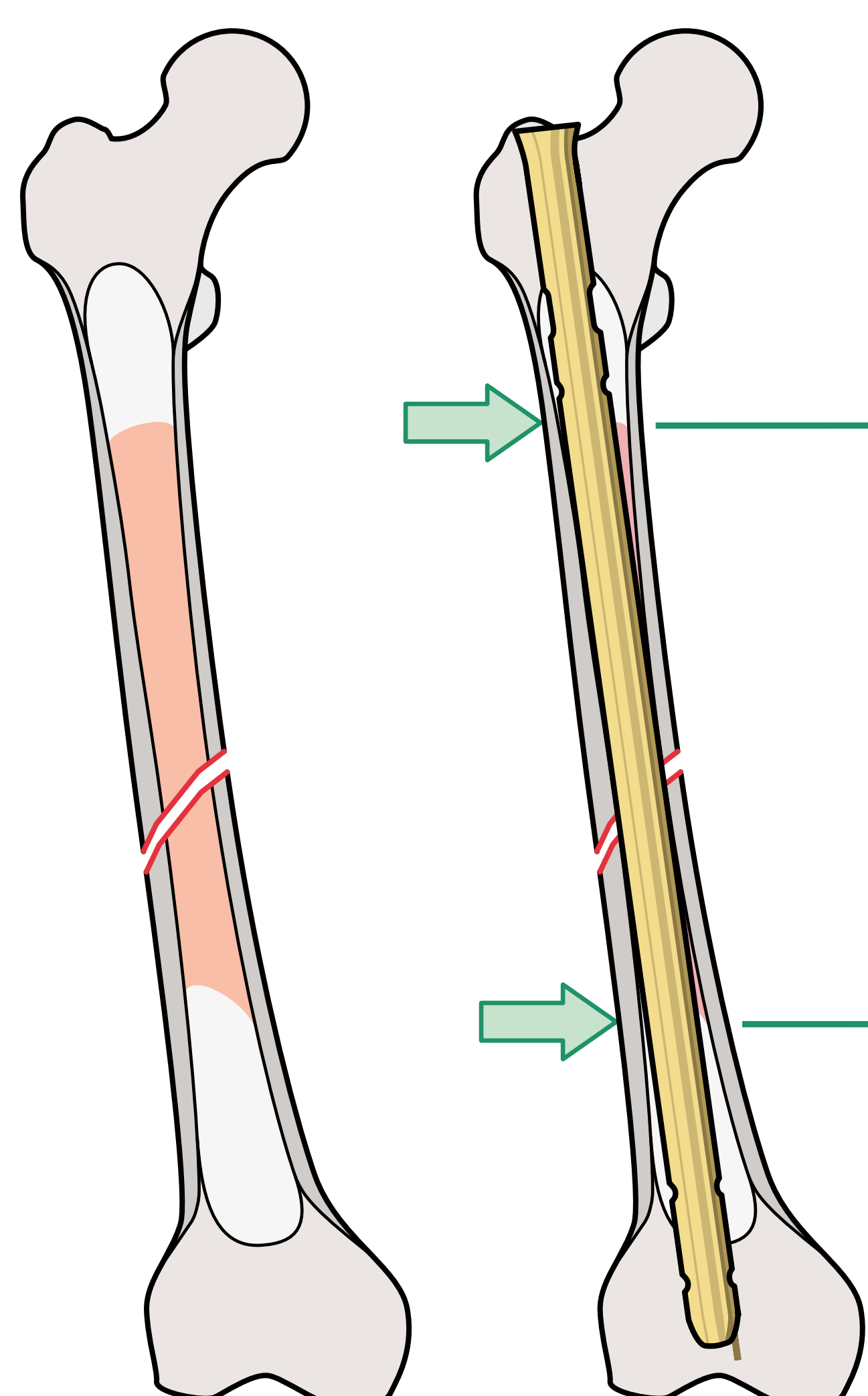


a slotted nail increases
the radial preload

Reaming

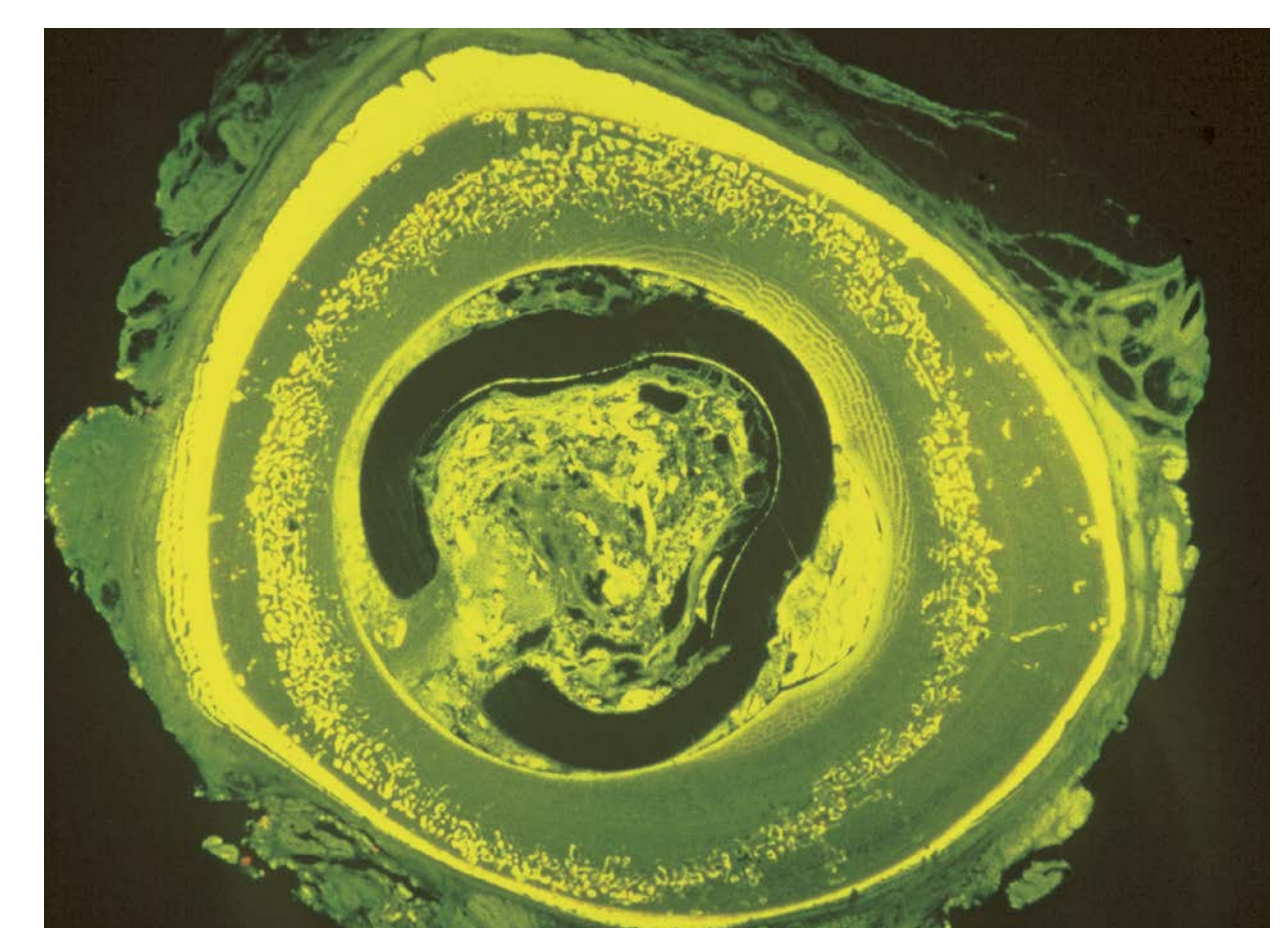
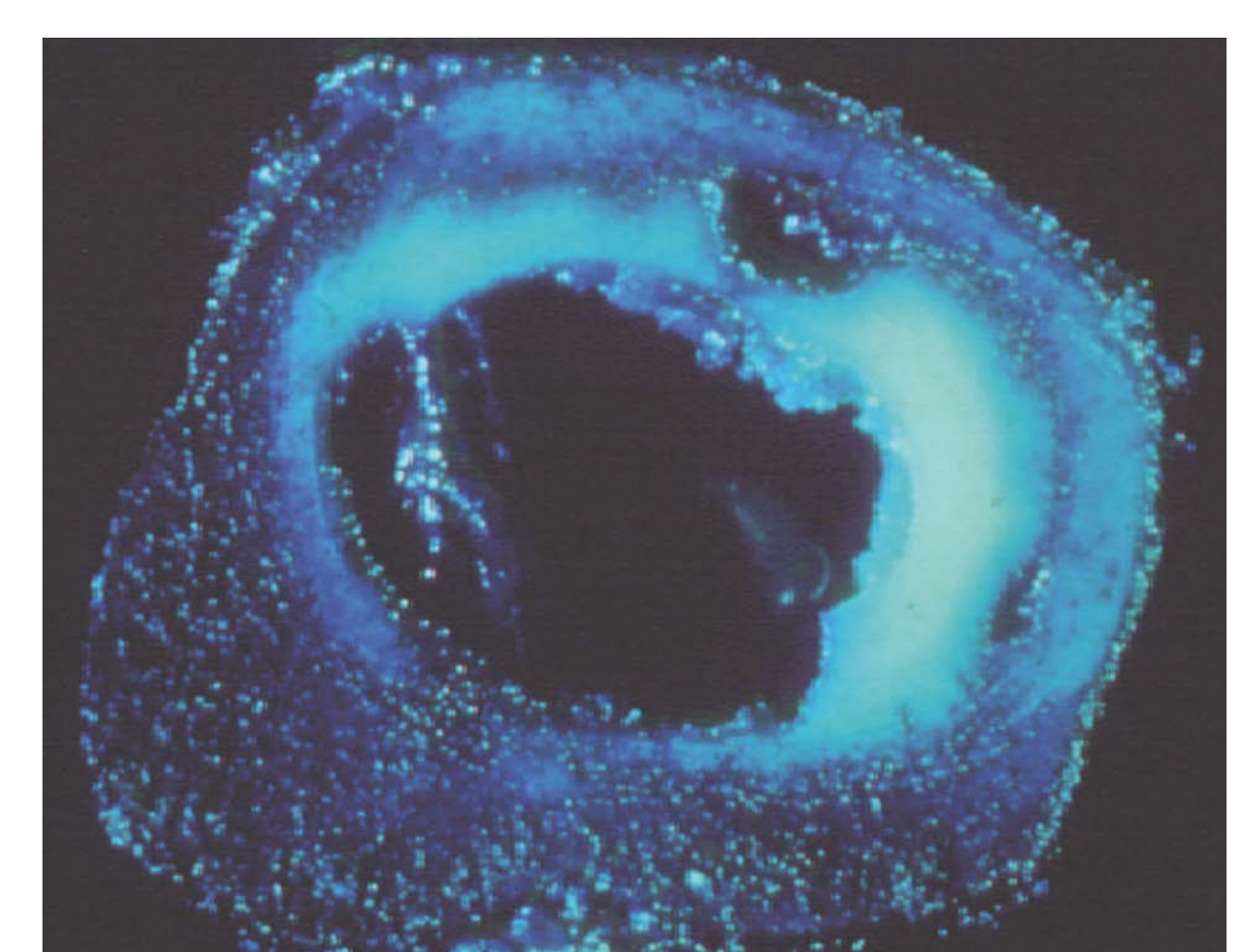
Mechanics

Cylindrical medullary cavity
Long-distance contact
between bone and nail



Biology

Necrosis of the inner two
thirds of bone cortex



Mechanics of intramedullary fixation

Conventional nailing

Tasks

Examine stability of different nail constructs

Learning outcomes

- Describe indications for nailing without interlocking
- Identify common problems using nails that are too short or too thin
- Describe possible problems of nailing without interlocking

Take-home message

Nailing without interlocking

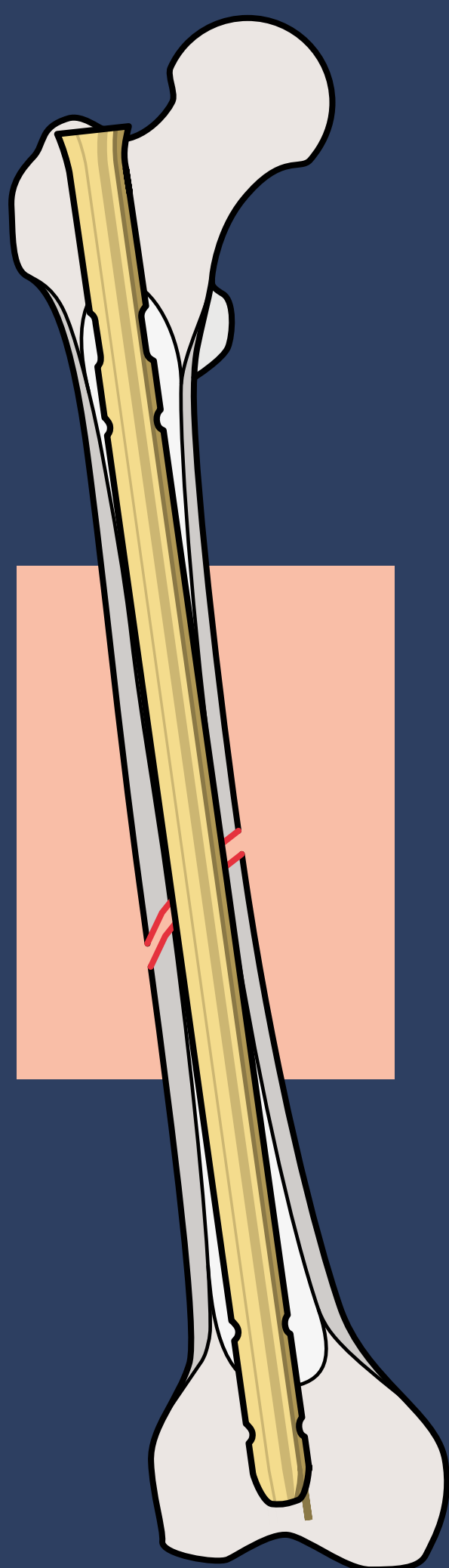
Needs

- Nail with proper length and diameter

Prerequisites

- Fractures in middle third of diaphysis
- Partial contact between main fragments

Be aware of the need for adequate rotational stability



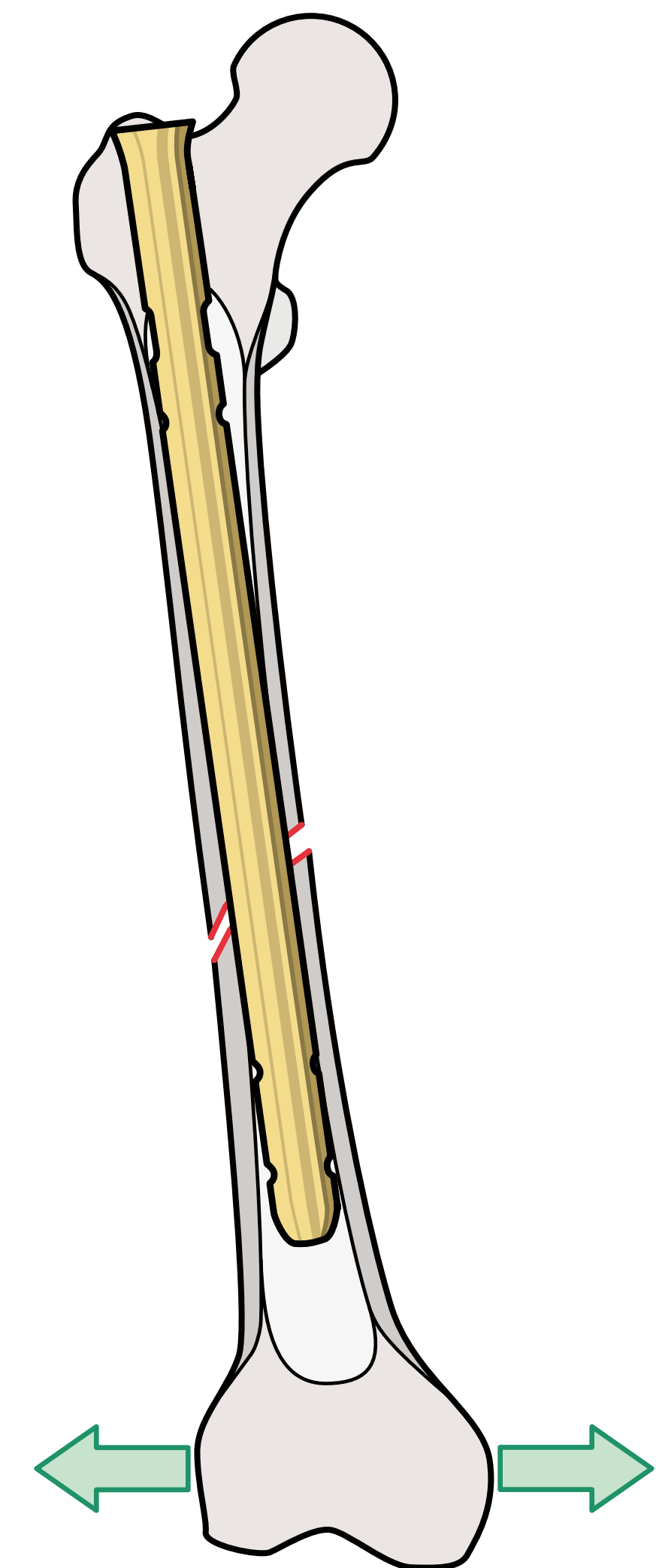
Nailing without interlocking

Requires a nail with proper length and diameter. Should only be applied when treating fractures in the middle third of the diaphysis, where partial contact between the main fragments is possible. Even then, sufficient rotational stability is difficult to achieve.

Residual instability

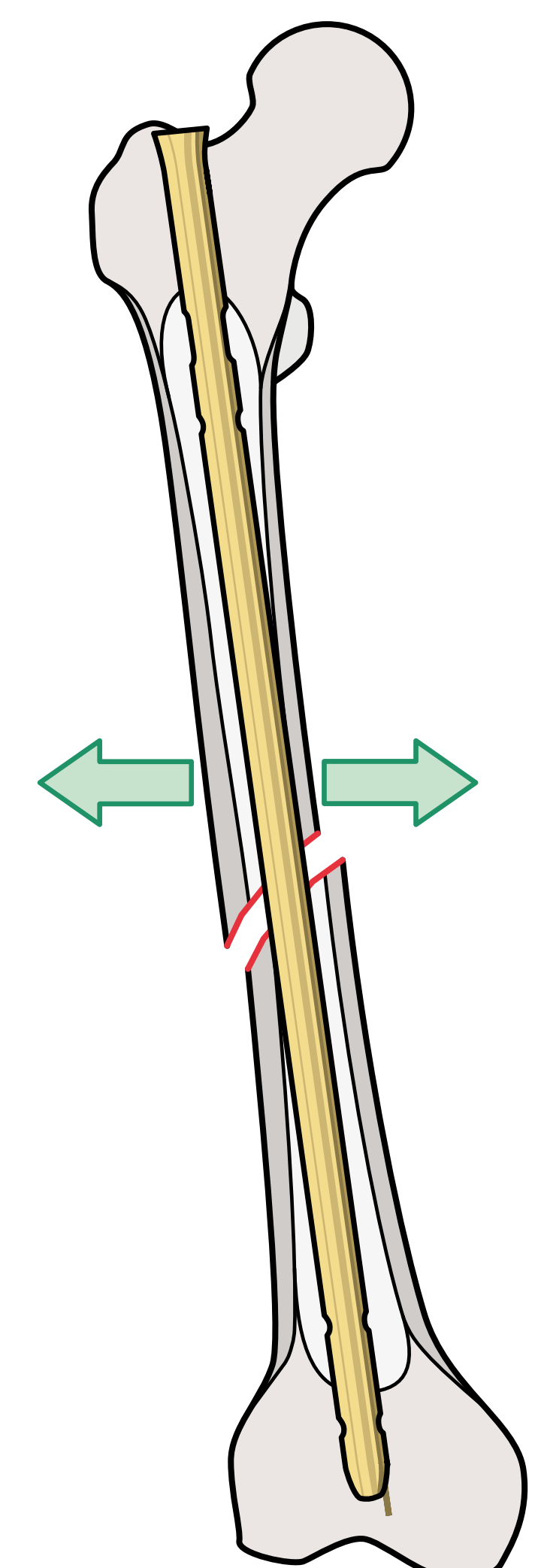
Nail too short

- Nail does not engage in the distal metaphysis
- Distal fragment unstable



Nail too thin

- No contact between nail and bone in fracture zone
- No radial preload
- Instability at fracture site



Mechanics of intramedullary fixation

Interlocked nailing

Tasks

Examine stability of different nail constructs

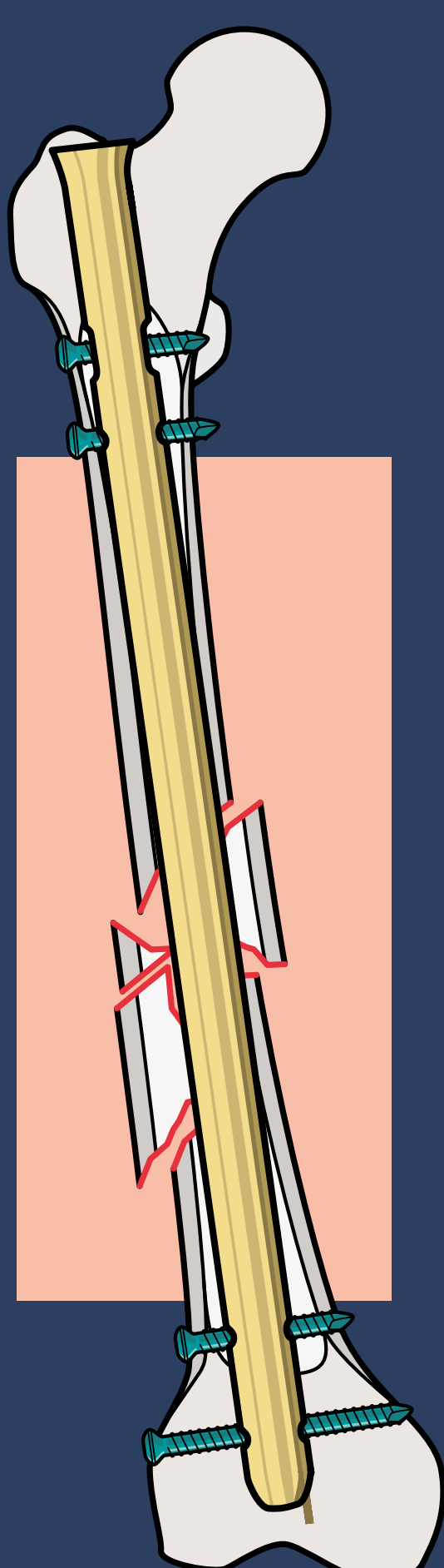
Learning outcomes

- Describe different nail locking options and possible influences on stability of fixation (dynamic locking, static locking)
- Explain elastic stable intramedullary nailing

Take-home message

Dynamic interlocking

Requires partial contact between main fragments



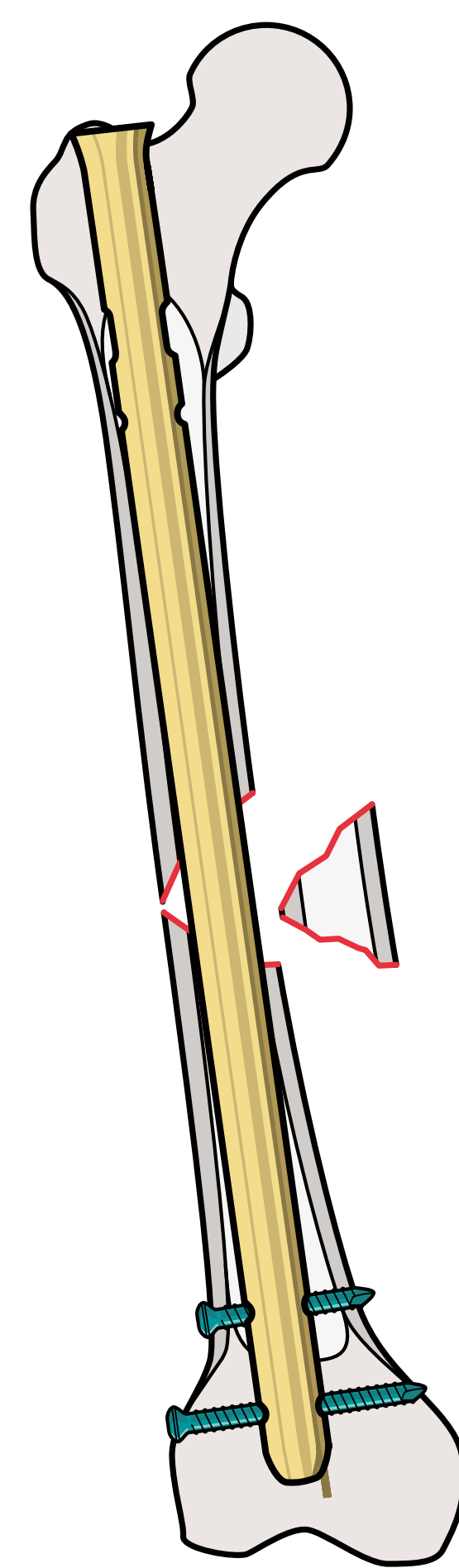
Static interlocking

In case of no contact between main fragments

Dynamic interlocking

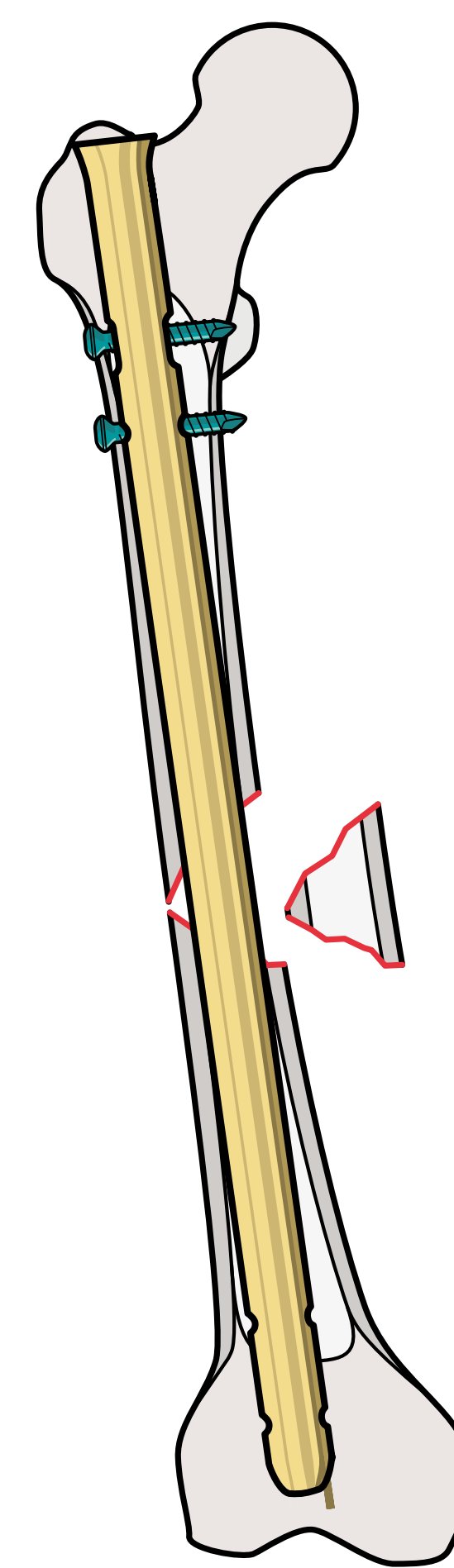
Only distal screws

Nail can stick out proximally



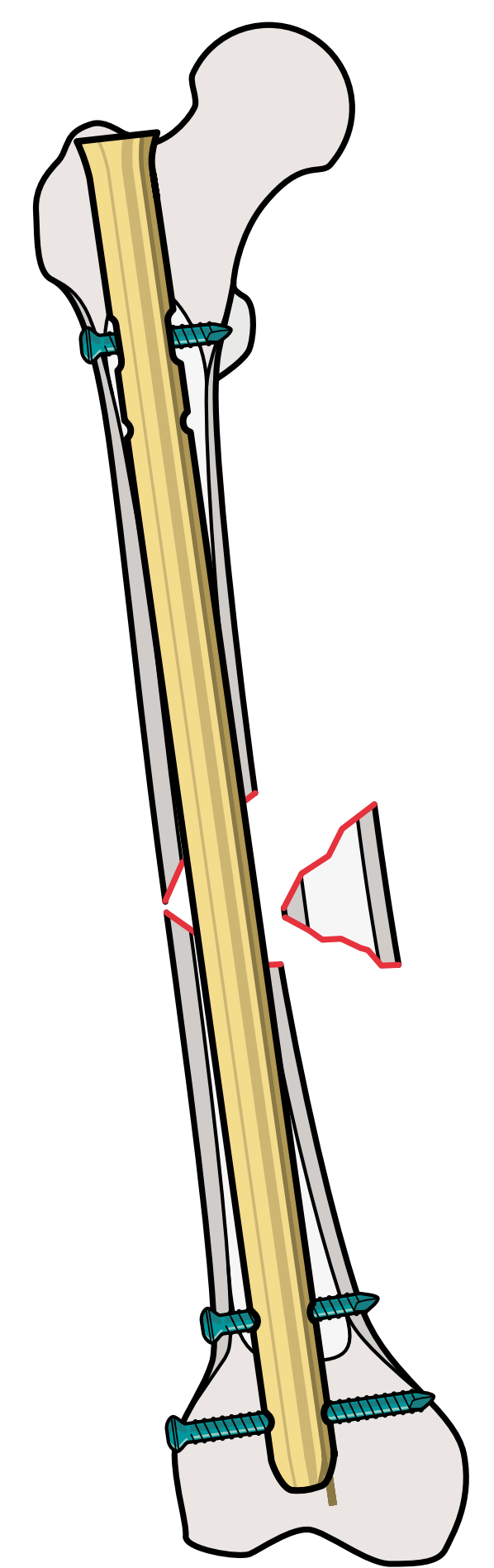
Only proximal screws

Nail can perforate knee joint



Distal and proximal screws

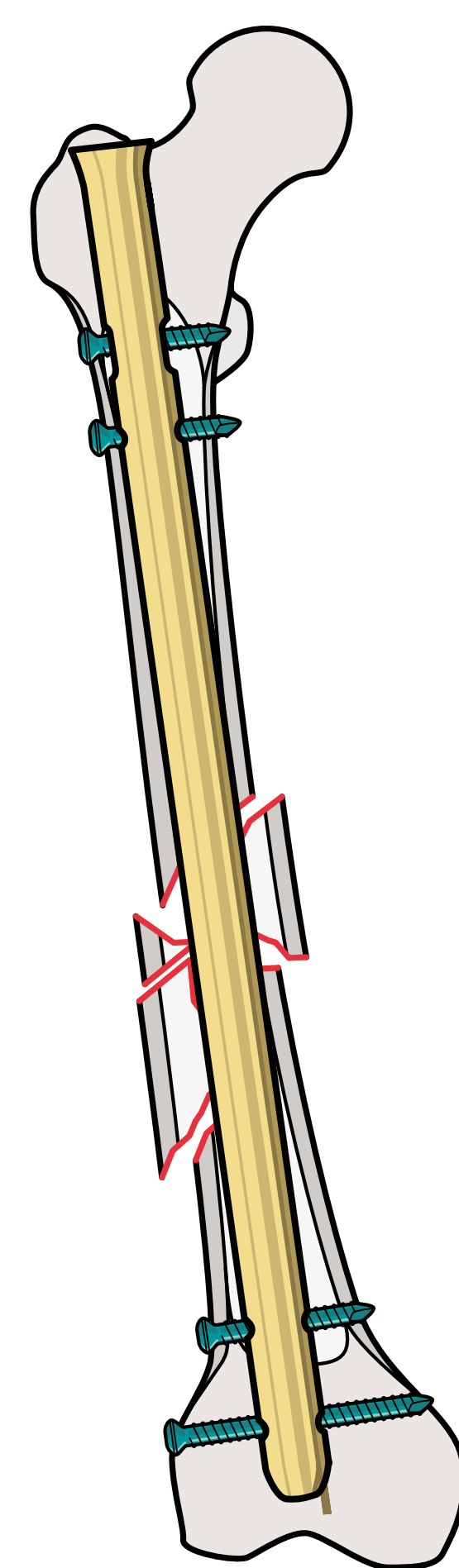
Proximal screw through dynamic hole allows controlled dynamization



Static interlocking

Distal and proximal screws

- Control of length
- Control of axis
- Control of torsion



Elastic stable intramedullary nailing

- For diaphyseal and metaphyseal fractures in children
- Minimally invasive
- Elastic nail
- Different diameters
- Precontouring needed

