# **Total Knee Arthroplasty For Non-Union**



Daniel C. Wascher, M.D. Sebastien Lustig, M.D. Philippe Neyret, M.D.

#### Disclosures

**Fellowship Support – Arthrex** Fellowship Support – Smith & Nephew **Associate Editor – Orthopaedic Journal of Sports Medicine** Editorial Board – American Journal of **Sports Medicine** Editorial Board – Journal of Knee Surg.

### **TKA for Non-Union**

#### Very Little Literature

**Case Reports** 

Included in Series Of Peri-Articular Fractures



#### Holl, KSSTA 2012

#### **Tibial Plateau Non-Union**

Rare After Low Energy Fractures Metaphyseal Bone Abundant Blood Supply 4 - 10% in Severe Fractures



Weiner, J Ortho Trauma 1995 Ruffolo, J Ortho Trauma 2015

#### **Distal Femur Non-Union**

0 – 20% With Lateral Locking Plates

Risk Factors Obesity Open Fracture Infection Stainless Steel Plate



**Rodriguez, Injury 2013** 

# TKA for Distal Femur Non-Union

Recent Systematic Review Only 5.9% Of Distal Femur Non-Unions Treated With Arthroplasty



#### **Ebrahim, Ortho Surg 2013**

#### **Causes of Non-Union**

Bad Mechanics Fracture Pattern Fixation Method

Bad Biology Patient Factors Environment

Table 1 Risk factors contributing to non-union		
General risk factors	Local risk factors	
Gender	Fracture personality	
Age	Type of fracture	
Diet	Exposure	
Diabetes	Infection	
Osteoporosis	Multiple	
Muscular mass	trauma/fracture	
Smoking		
Alcohol NSAIDS		

#### Calori, Injury 2007

### **Non-Union Scoring System**

#### Bone

#### **Soft Tissue**

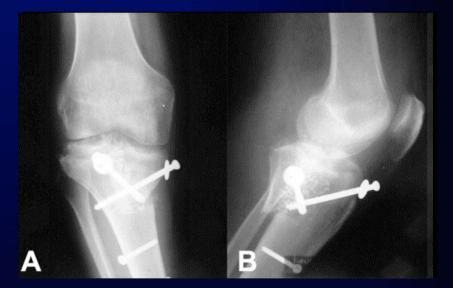
#### Patient

		Score <sup>a</sup>	Max.	. sco
The bone				
Quality of the bone	Good Moderate (e.g. mildly osteoporotic) Poor (e.g. severe porosis or bone loss)	0 1 2		
	Very poor (Necrotic, appears avascular or septic)	3	3	
Primary injury - open or closed fracture	Closed Open 1 <sup>e</sup> grade Open 2-3 <sup>o</sup> A grade Open 3 <sup>o</sup> B-C grade	0 1 3 5	5	
Number of previous interventions on this bone to	None <2 <4	1 2 3	-	
procure healing	>4	4	4	
Invasiveness of previous interventions	Minimally-invasive: Closed surgery (screws, k wires,) Internal intra-medullary (nailing) Internal extra-medullary Any osteosynthesis which includes bone grafting	0 1 2 3	3	
Adequacy of primary surgery	Inadequate stability	0	1	
Weber & Cech group	Hypertrophic Oligotrophic Atrophic	1 3 5	5	
Bone alignment	Non-anatomic alignment Anatomic alignment	0	1	
Bone defect - Gap	0.5-1cm 1-3cm >3cm	2 3 5	5	
Soft tissues				
Status	Intact Previous uneventful surgery, minor scarring Previous treatment of soft tissue defect (e.g. skin loss, local flap cover, multiple incisions, compartment syndrome, old sinuses)	0 2 3		
	Previous complex treatment of soft tissue defect (e.g. free flap) Poor vascularity: absence of distal pulses, poor capillary refill, venous insufficiency	4 5		
	Presence of actual skin lesion/defect (e.g. ulcer, sinus, exposed bone or plate)	6	6	
The patient				
ASA Grade	1 or 2 3 or 4	0 1	1	
Diabetes	No Yes - well controlled (HbA1c <10) Yes - poorly controlled (HbA1c >10)	0 1 2	2	
Blood tests: FBC, ESR, CRP	FBC: WCC >12 ESR >20 CRP >20	1 1 1	3	
Clinical infection status	Clean Previously infected or suspicion of infection Septic	0 1 4	4	
Drugs Steroids NSAIDs		1	7	
Smoking status	No Yes	0	5	

Calori, Injury 2008

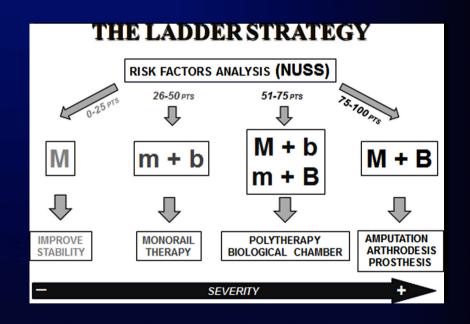
#### **Non-Union Treatment**

Improve Stability Revision ORIF Improve Biology Infection Treatment Bone Grafting BMP-1 Smoking Cessation



### **Non-Union Scoring System**

Prosthesis Should Only Be Considered In Cases of Major Mechanical and Major Biological Problems



#### Calori, Injury 2008

## TKA for Articular Fracture Non-Union

Small Periarticular Fractures

**Excise Bone** 

**TKA with Augments** 



### **Non-Union Tibial Plateau**



### **Non-Union Hoffa's Fx**



### **Non-Union UKA Fracture**



### **TKA for Non-Union**

Removal of Un-United Bone

Infection Treatment Antibiotic Spacer

**Megaprosthesis** 

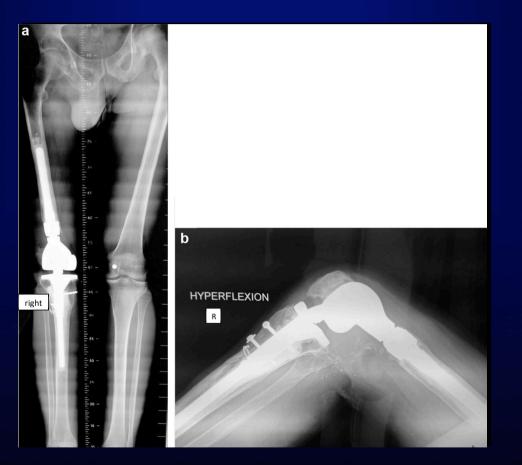


### s/p Hunting Accident



#### Herry, OTSM 2016

### **TKA for Non-Union**



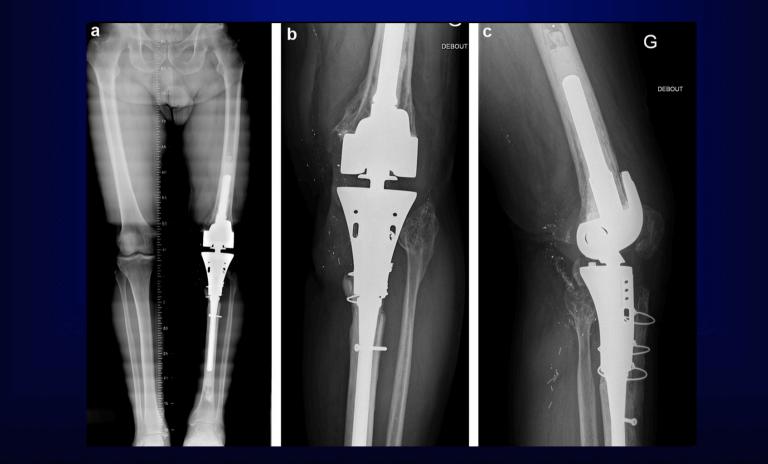
#### Herry, OTSR 2016

## 62 y.o. Male Hunting Accident



#### Herry, OSTR 2016

### **TKA for Tibial GSW**



#### Herry, OTSR 2016

### **TKA for PPF Non-Union**

3.6 - 9.2%

#### Evaluate Adequacy of Fixation

#### Presence of Infection



Ristevski, J Ortho Trauma 2014

# 1<sup>st</sup> Stage

#### Removal of Hardware & Infected Bone

#### Implantation of Antibiotic Spacer



### **2<sup>nd</sup> Stage Reimplantation**





#### Outcomes

**No Good Data** 

Depends on Severity of Problem Treated

Often a Limb-Salvage Procedure



#### **Take Home Points**

- Most Non-Unions Are Best Treated With Repeat ORIF + Graft
- TKA Can Be Used In Extreme Cases
- Augmented TKA for Small Defects
- Resection & Antibiotic Spacer for Large Defects
- 2<sup>nd</sup> Stage Megaprosthesis When Infection resolved

# Thank You !!

