HTO CW

How I do

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Planning

- ✓ Based on long film X ray
- ✓Normo or hypercorrection
- Medial hinge in cancelous bone
- √Souple fixation / plate



Patient's setting

Supine position

Pad under buttock / foot vertical

Post on the lateral aspect of the tigh



Lateral approach



Fibular osteotomy first

- 1. Gentle Muscular Detachement
- 2. Flexed knee
- 3. Three retractors
- 4. Two oblique cuts from lateral to medial
 - & 2 mm bone washer resection



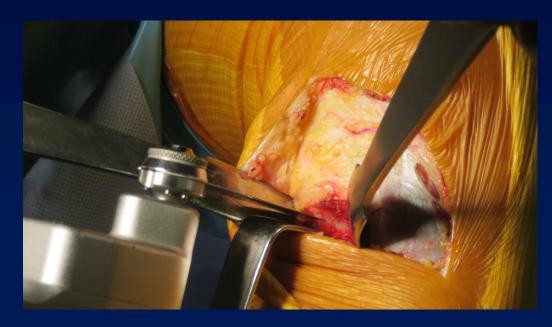
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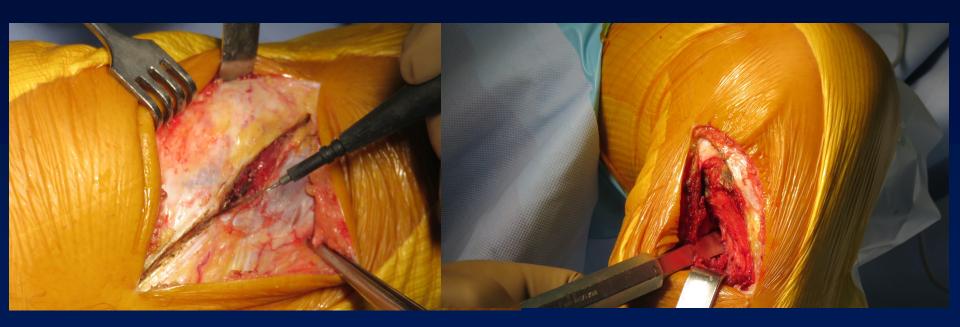
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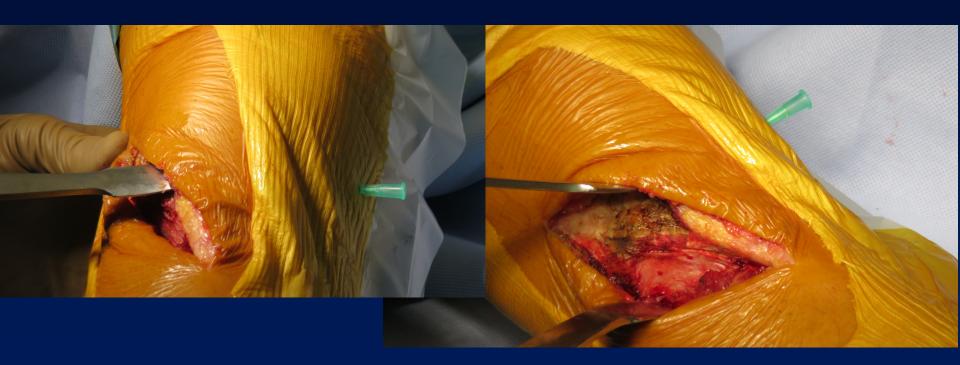
Tibial Exposure

- 1. Muscular & PT release
- 2. Retractors
- 3. Needle in the medial joint line



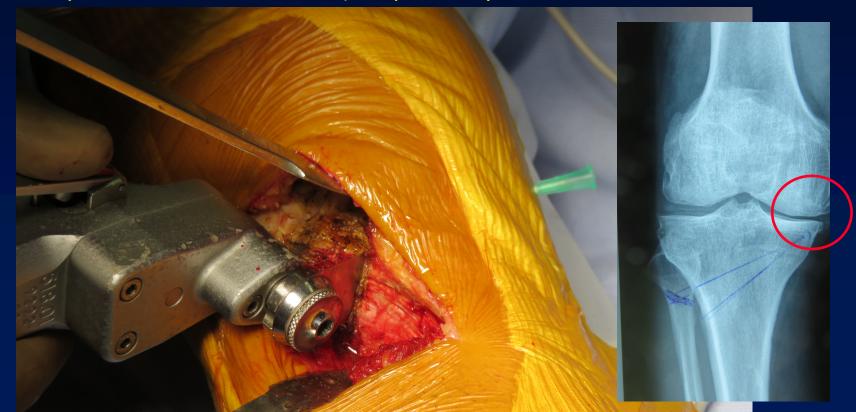
Tibial Exposure

- 1. Muscular & PT release
- 2. Needle in the medial joint line
- 3. Retractors



Tibial cuts

- 1. First from lateral to medial
- 2. Target = needle (cancelous bone of medial plateau)
- 3. No X-ray routinely
- 4. Pay attention to obliquity / slope

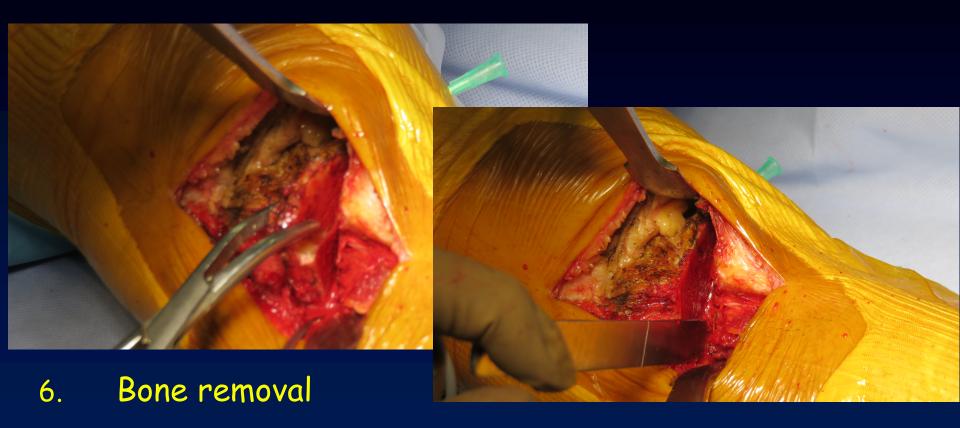


Tibial cuts



- 4. Pay attention to obliquity / slope
- 5. Second cut parallel to the blade after measurement

Tibial cuts



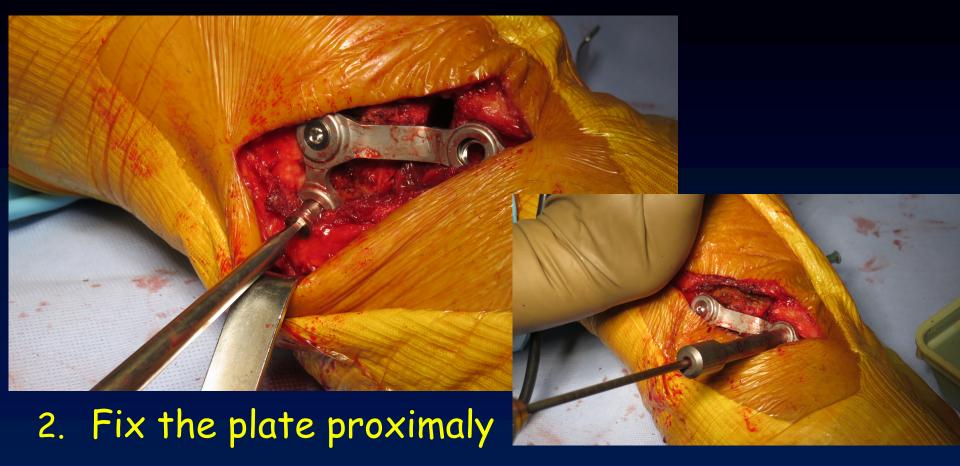
7. Cut tibial posteromedial cortex ++

Fixation

1. Progressive reduction by valgus to compact bone. (Pay attention to fibular sliding)



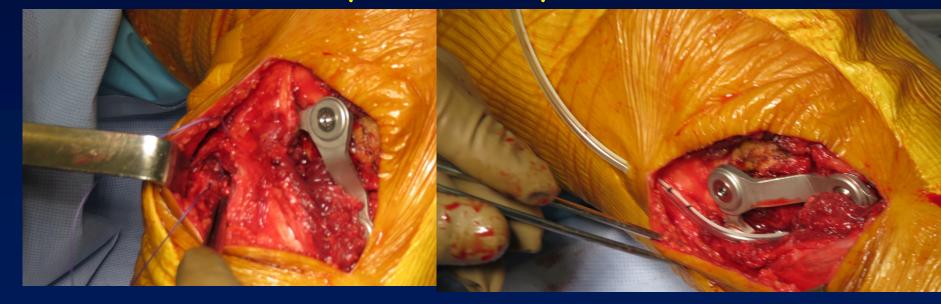
Fixation



3. Fix the plate distally with distal screw while assistant reduce manually

Closure

- ✓ Drainage
- ✓ Muscle on fibular neck
- ✓ Aponeurosis
- ✓ No block / compartment syndrom!



Dynamic fixation / Post op regimen







- 1. No limited early motion
- 2. Massage, quad strenghtening
- 3. WB to stimulate bone formation
 - ✓ 1/3 @ day 2 with splint
 - √ 2/3 @ day 45 w/o splint, cycliing, swimming
 - Progressive to full WB @ 3 month