

# TKA Fractures

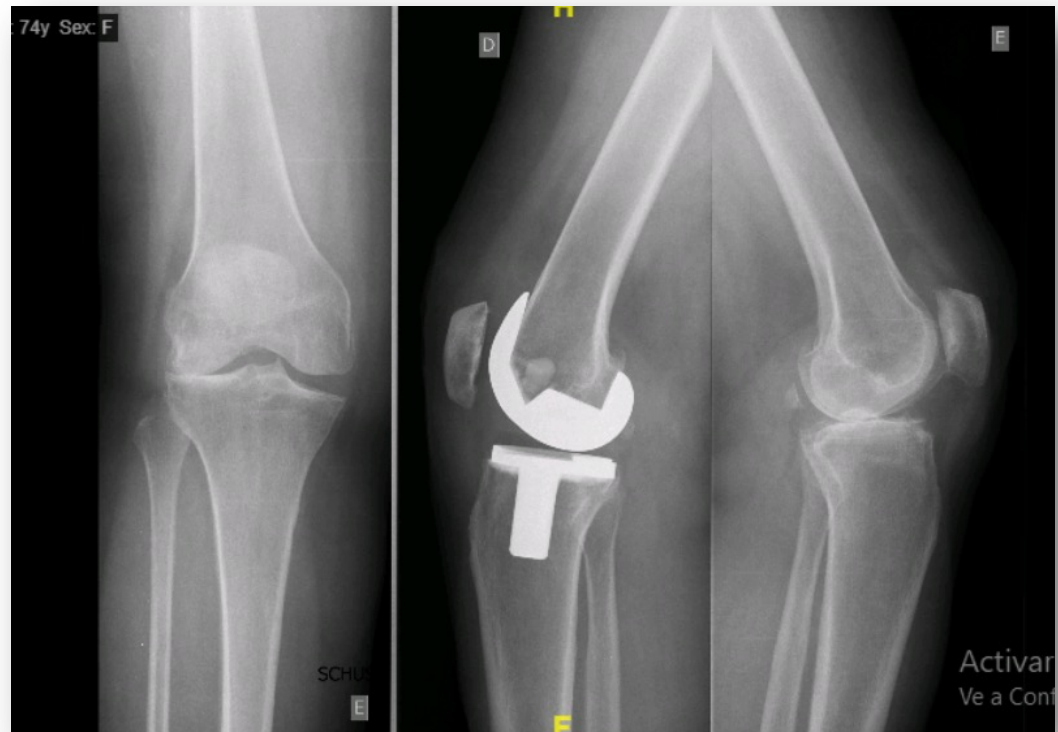
## Clinical Cases

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Spain



# CLINICAL CASE 1

- 64 year-old woman
- 118 Kg
- DM
- Cirrhosis
- Smoker
- Uneventful right TKA (4y FU)



# CLINICAL CASE 1

- 64 year-old woman
- 118 Kg
- DM
- Cirrhosis
- Smoker
- Uneventful right TKA



# CLINICAL CASE 1

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- What's next?



# CLINICAL CASE 1

- 64 year-old woman
- 118 Kg
- DM
- Cirrhosis
- Smoker
- Uneventful right TKA
- **Bariatric surgery**



- 64 year-old woman
- 118 Kg
- DM
- Cirrhosis
- Smoker
- Uneventful right
- Bariatric su

**6 months later...**



# CLINICAL CASE 1

- 64 year-old woman
- 118 Kg (BMI 43)
- DM
- Cirrhosis
- Smoker
- Uneventful right
- Bariatric su

**85 Kg!!!**





# CLINICAL CASE 1

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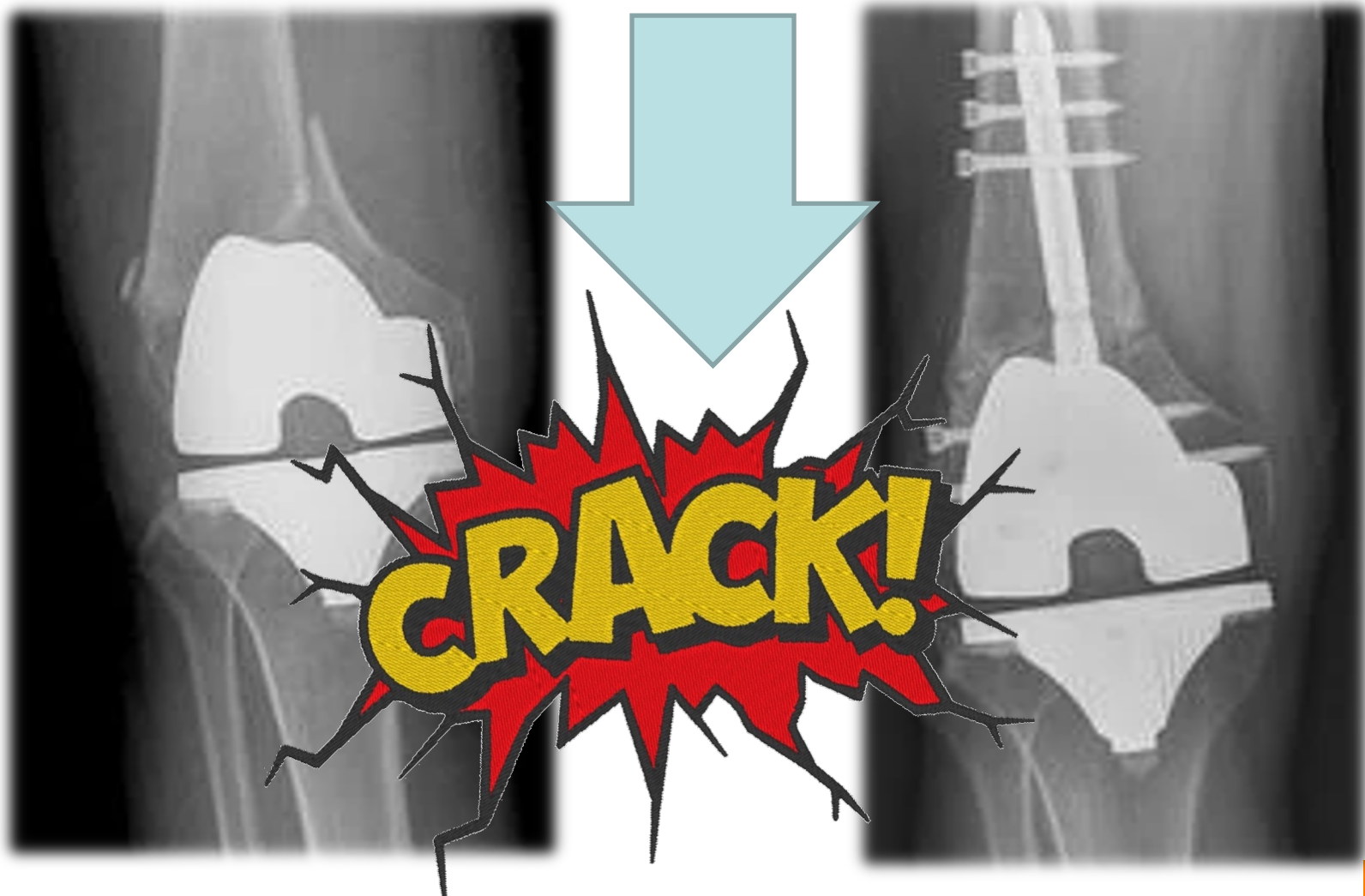
- 64 year-old woman
- 33 kg weight loss
- Finally, regular TKA was scheduled





# CLINICAL CASE 1

While impacting femoral component....



# CLINICAL CASE 1

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- **2h 10m surgery**
- What other measures should have been taken?

Premature menopause was not assessed



# CLINICAL CASE 1

Current Osteoporosis Reports

<https://doi.org/10.1007/s11914-020-00579-2>

NUTRITION, EXERCISE AND LIFESTYLE IN OSTEOPOROSIS (S SHAPSES AND J LAPPE, SECTION EDITORS)

## The Skeletal Consequences of Bariatric Surgery

Alexandra N. Krez<sup>1</sup> · Emily M. Stein<sup>1,2</sup>



*nutrients*



Review

## Postoperative Osteoporosis in Subjects with Morbid Obesity Undergoing Bariatric Surgery with Gastric Bypass or Sleeve Gastrectomy

Jan O. Aaseth<sup>1,2,\*</sup>  and Jan Alexander<sup>3</sup> 



# CLINICAL CASE 1

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Premature menopause was not assessed !

Early menopause and weight loss are significant factors associated with risk of future fracture in middle-aged women

L Moberg, V Hamrefors, A Fedorowski & C Rogmark

*BMC Musculoskeletal Disorders*

**Early menopause** between 40 to 45 years and self-reported **weight loss** since age of 20 are relevant factors associated with **increased fracture risk in middle-aged women**.

These factors were independent of traditional predictors of fracture risk among women and may be considered in preventive initiatives.



# Remember

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- Be careful with patients after bariatric surgery
- Do everything in your hands to reduce infection
- May AI and big data identifying high risk patients and personalize which prevention strategies should be applied?



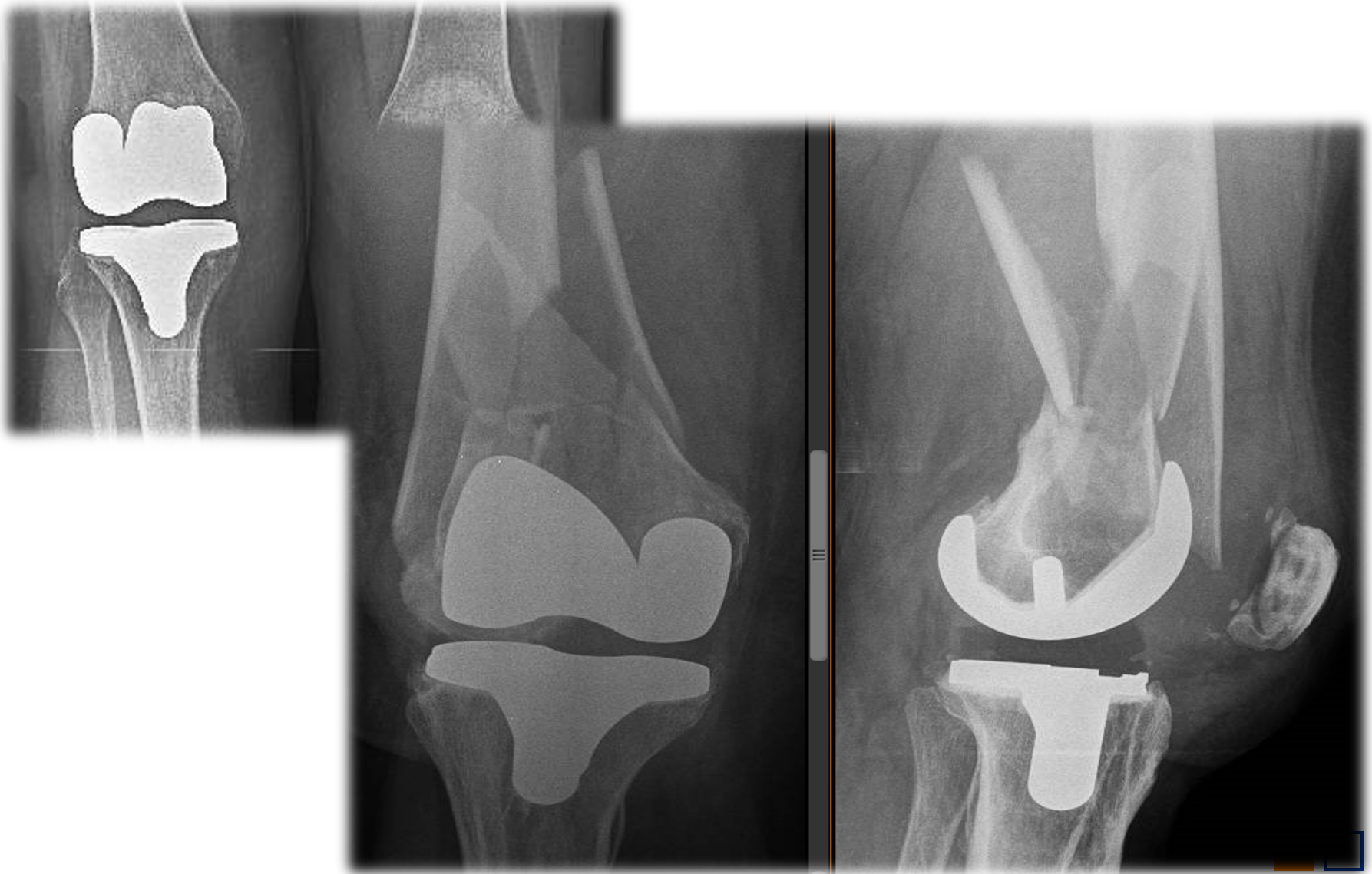
# CLINICAL CASE 2

## 76 y/o woman

- Well fited
- High cholesterol

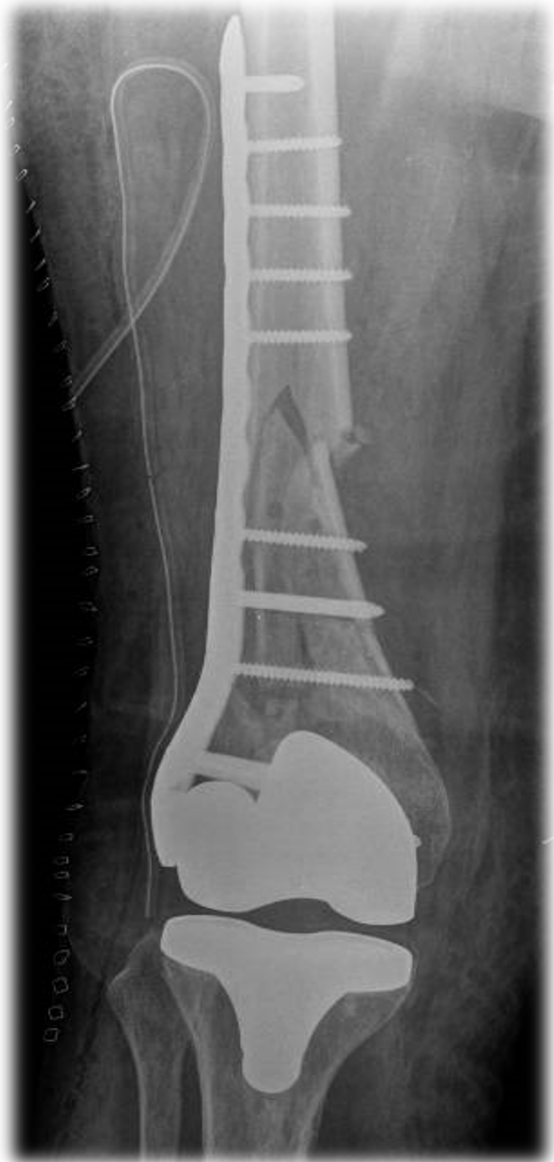


# CASE 2





# CASE 2



DECODING



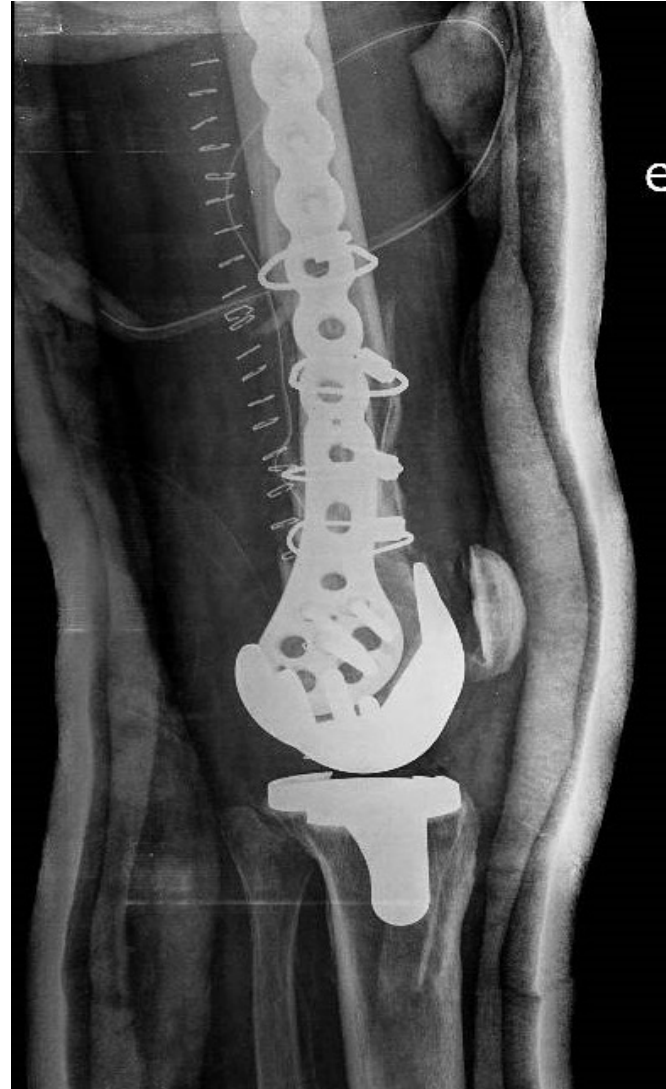
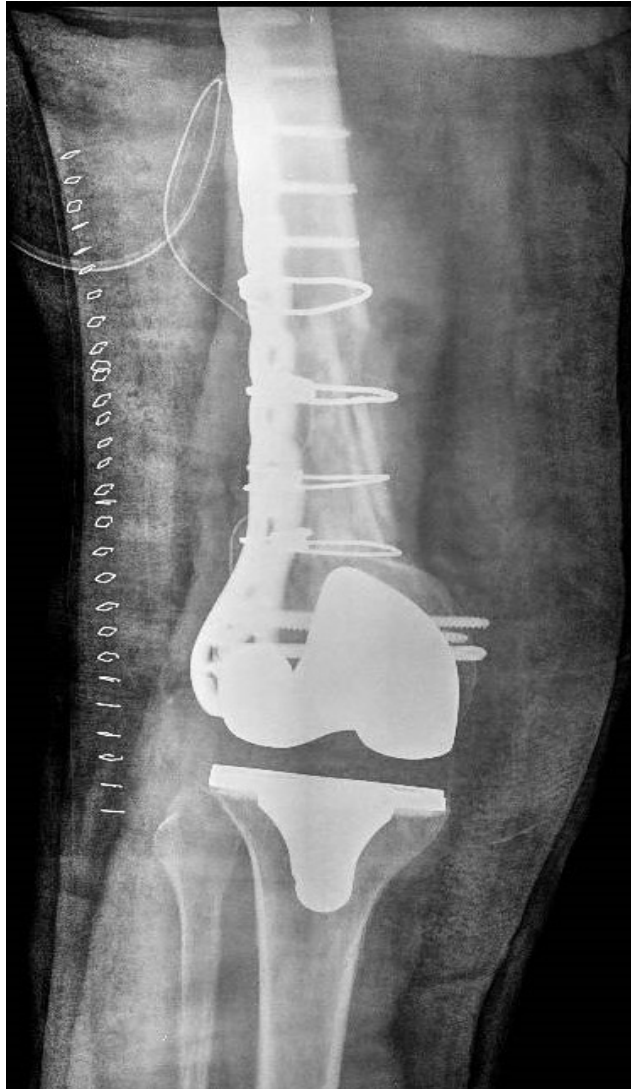
# CLINICAL CASE 2

- Only 2 weeks later... normal CRP → NO INFECTION



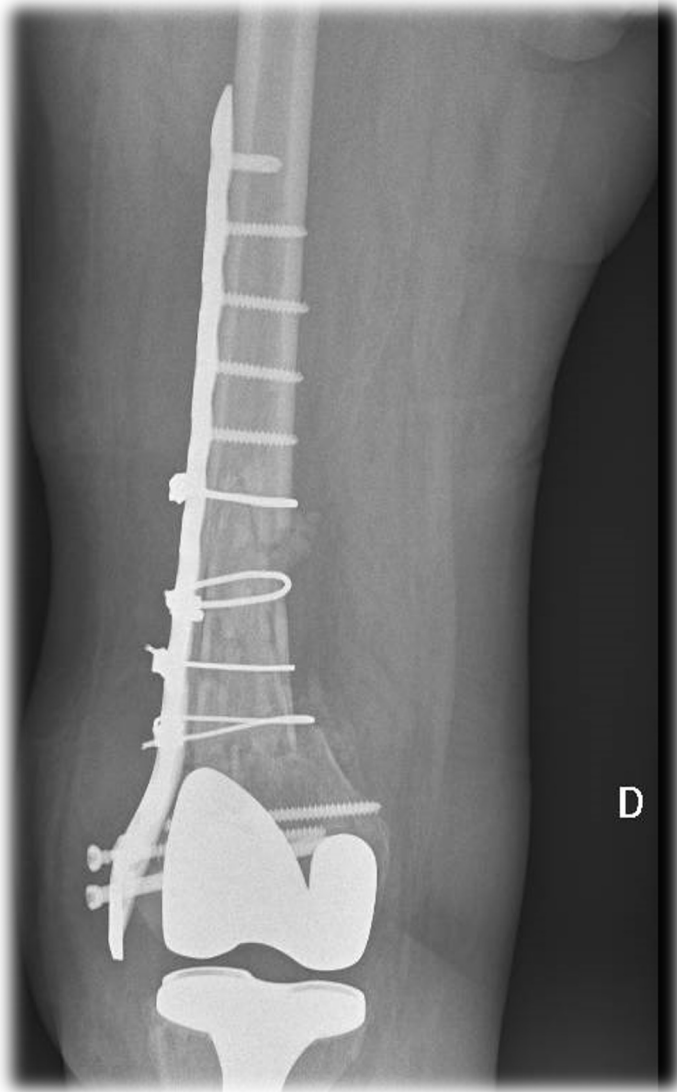
# CLINICAL CASE 2

- New rev-ORIF. NO SAMPLES again !!!!!!!!!!!



# CLINICAL CASE 2

- 3 months later. Normal CRP → no infection



# CLINICAL CASE 2

- 2ond rev-ORIF + bone allograft. NO SAMPLES!!!!!!!!!!



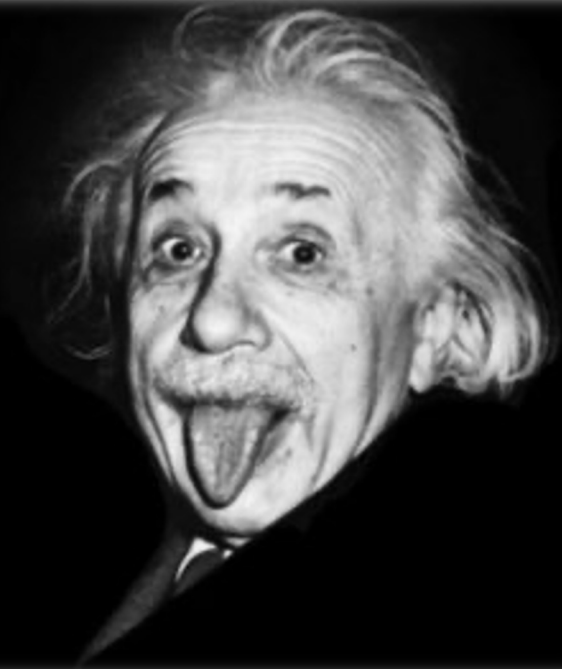


# CLINICAL CASE 2

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"Insanity is doing the same thing over and over again and expecting different results"

*Albert Einstein*



# CLINICAL CASE 2

- 1 year after INDEX fracture





# CLINICAL CASE 2

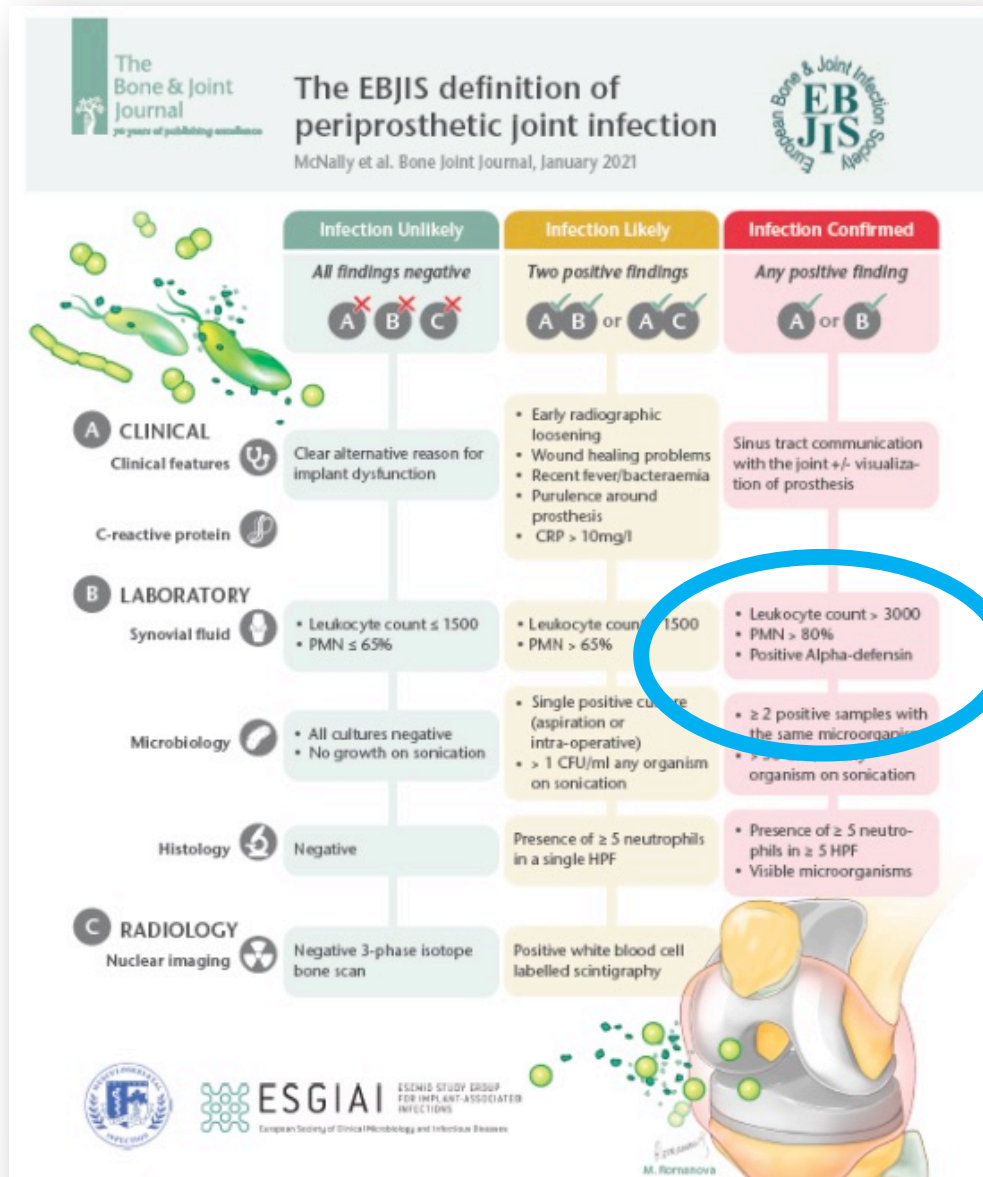
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I am a better trauma guy, I will do a proper fixation

- Infected non-union → Masquelet / Transport
- Infected non-union + PJI → Tumoral prosthesis

# CLINICAL CASE 2



Joint aspiration

4.250 leucocytes



# CLINICAL CASE 2

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**January 2023**

## **1<sup>st</sup> stage Rev TKR**

- Hardware (prosthesis, plate & screws) and distal femur removal
- Debridement + lavage
- ALBC: Vancomycin + Tobramycin
- **CNS Rifa –S**



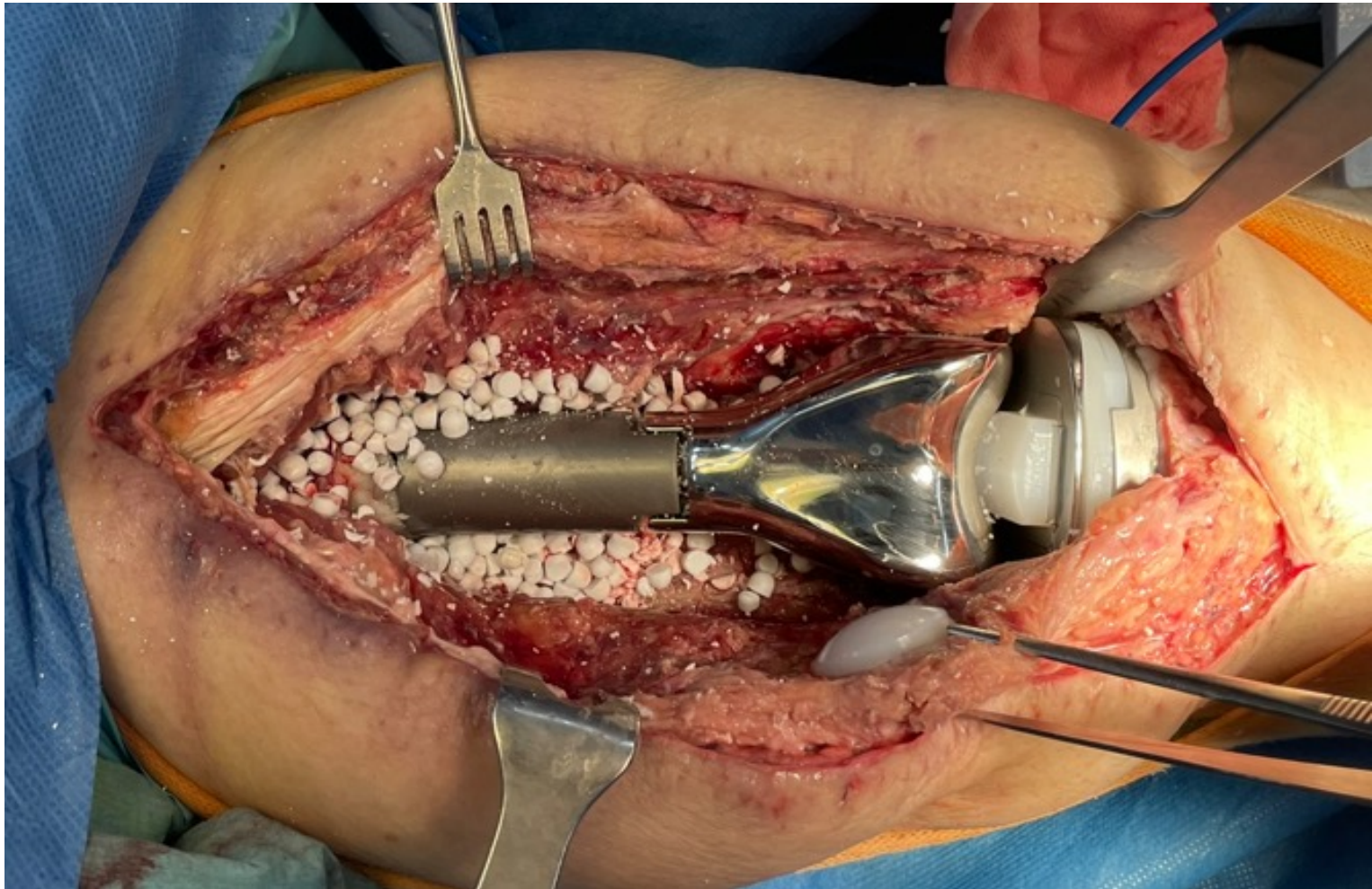
# CLINICAL CASE 2



# CLINICAL CASE 2

**February 2023**

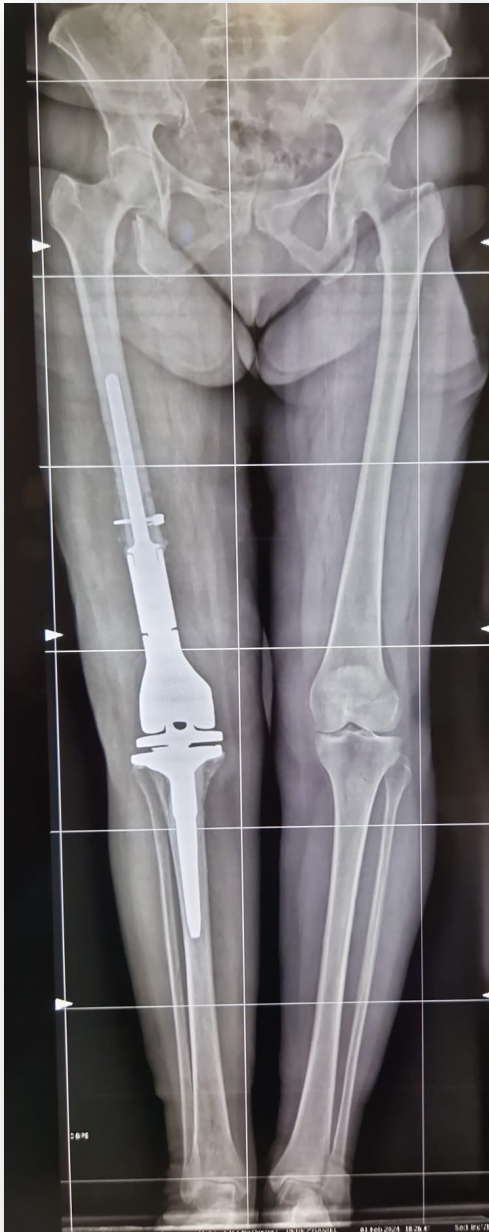
- **2n stage GMRS Stryker + COPAL V/G + Stimulan V+G**





# CLINICAL CASE 2

*One year follow-up*





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