

# Easy extraction of a fractured hip screw

## A technical note

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A 52-year-old man sustained an unstable 3-fragmented intertrochanteric fracture with a subtrochanteric extension. He was operated on using open reduction and fixation with a cannulated sliding hip screw and plate. 5 months postoperatively the hip suddenly became painful. Radiographs showed that the fracture was non-united and that the screw had fractured (Figure 1). A new fixation with a sliding hip screw was indicated.

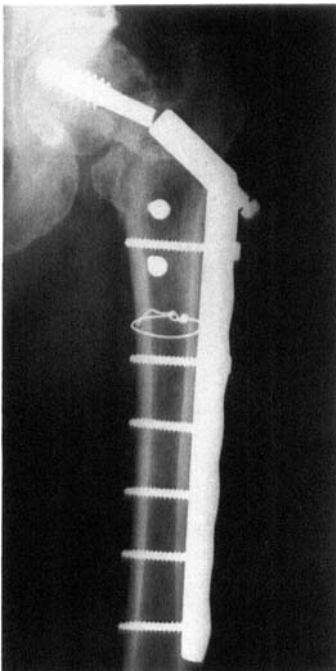


Figure 1. Non-union and fracture of the hip screw 22 weeks postoperatively.

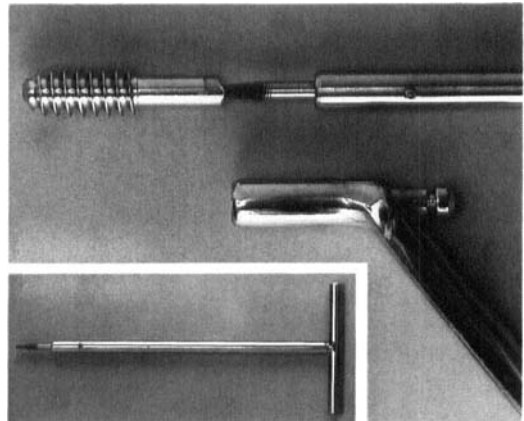


Figure 2. Tap with counter-clockwise threads in place.

To remove the fractured screw we made a tap with counter-clockwise threads (Figure 2) with the aid of which the screw was easily extracted. An operation for non-union was then performed. The postoperative course was uneventful and the fracture healed.

### Discussion

Especially in young patients it is sometimes difficult to remove a thick hip screw with wide threads made for cancellous bone. It may not be enough to be able to rotate the screw but may also be necessary to pull at the same time. In a case like this, it is disadvantageous to remove bone to get hold of the screw. With our handtap there is no need to remove any bone, and the grasp gets tighter if screwed harder.