

AKE RYDÉN, LUND:

ON FRACTURES OF THE FEMUR IN CONNEXION
WITH DELIVERY

SUMMARY¹⁾

The author reviews the cases of fracture in connexion with delivery occurred at the Women's Hospital in Lund during the

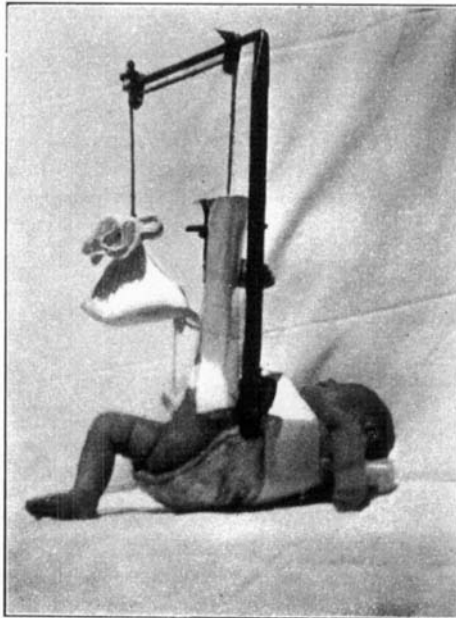


Fig. 1.

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years 1900—1933. During this period, 16 cases of fracture of the femur were registered. Of these, 3 died in sequence of the delivery; the remaining 13 cases are examined.

1.—The reposition is always difficult. In many cases, the fracture had to be left to heal in a position anatomically more or less unsatisfactory. In all cases, osseous healing set in within



Fig. 2.

short time, however; and the malposition was during the next few months corrected by spontaneous remodelling, until a satisfactory position was obtained. In no case did any trouble arise during the age of growth; the children learned to walk within the usual time. The result as regards *primary healing* was thus good.

2.—Examination of the *late results* in the 6 oldest patients, now in ages ranging from 9 to 20 years, has shown that in one case there still remained a distinct curving of the femur at the point of the old fracture, while, in the five other, hardly a

trace of the fracture could be observed in the roentgenograms. In several of the cases there were, however, in other respects, changes still to be noticed, such as shortening and subjective troubles. These, though certainly slight, cannot be dismissed as altogether negligible.

3.—The best treatment has been found to be extension in portable plaster-of-Paris bed (*Schanz, 1928*). The reduction should be completely carried out, preferably in the course of the



Fig. 3.

first few days, but at any rate within a week of the fracture's occurring. Otherwise it will be more difficult, owing to the early formation of callus.