Acetabulum and Pelvis Fractures: A Retrospective Study

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Background: Fractured acetabulum and pelvis are serious injuries. In the last century, conservative treatment was the most common. Conservative approach carries high incidence of morbidity and mortality. Over the last two decades, operative treatment has become the treatment of choice.

Objective: The aim of this study is to compare the outcome of conservative and operative treatment of fractured acetabulum and pelvis.

Design: A retrospective study.

Setting: Salmaniya Medical Complex (SMC), Bahrain.

Method: The hospital records and radiographic images for all patients with fractured acetabulum and pelvis admitted to SMC from January 2000 to March 2005 were reviewed. Eighty-one patients were included in the study, 61 males and 20 females with a mean age of 41 years (ranges from 18 to 68). Patients under the age of 18 years were excluded. Injuries were classified according to Tile’s comprehensive classification.

Result: The main causes for injuries were as follows: 40 (49.4%) patients due to a fall from height and 37 (45.7%) due to road traffic accidents (RTA). Sixty-five out of 66 were treated conservatively from January 2000 to July 2004. Ten out of 15 were treated operatively from August 2004 to March 2005. The operated group had early mobilization, less complications and shorter hospital stay.

Conclusion: Operative treatment for acetabulum and pelvis fractures is technically demanding, but it has better outcome than conservative treatment.

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The pelvis is a complex anatomical structure formed of the sacrum, coccyx and the innominate bones. The three innominate bones fuse at the acetabulum that articulates with the head of the femur to form the hip joint. The pelvis contains and protects many important vessels, nerves, bladder, reproductive organs and viscera. The bony components of the pelvis are supported and held together by strong ligaments.

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