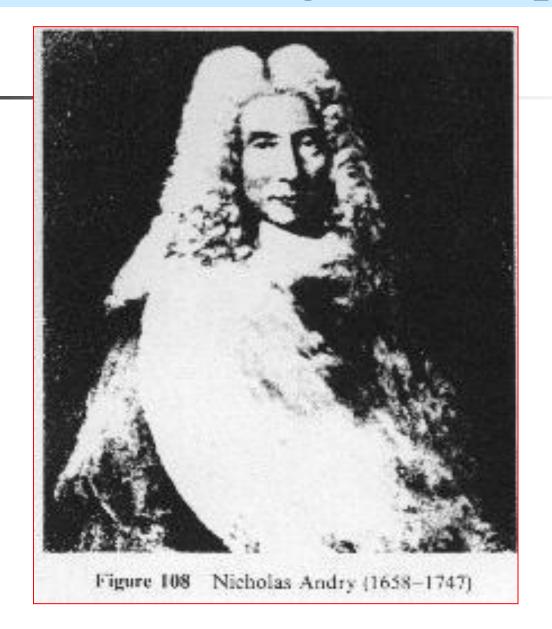
Introduction to musculoskeletal system.

20-2-2014

What is the meaning of Orthopaedics?



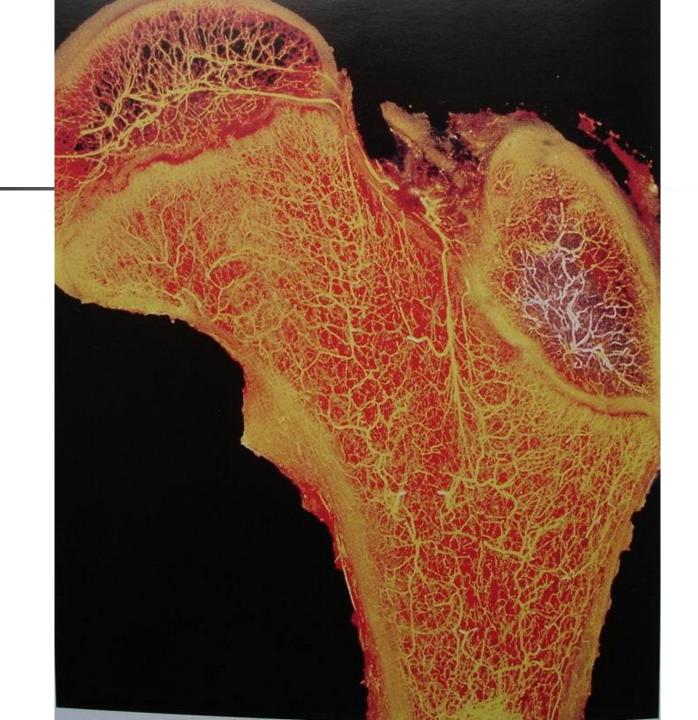


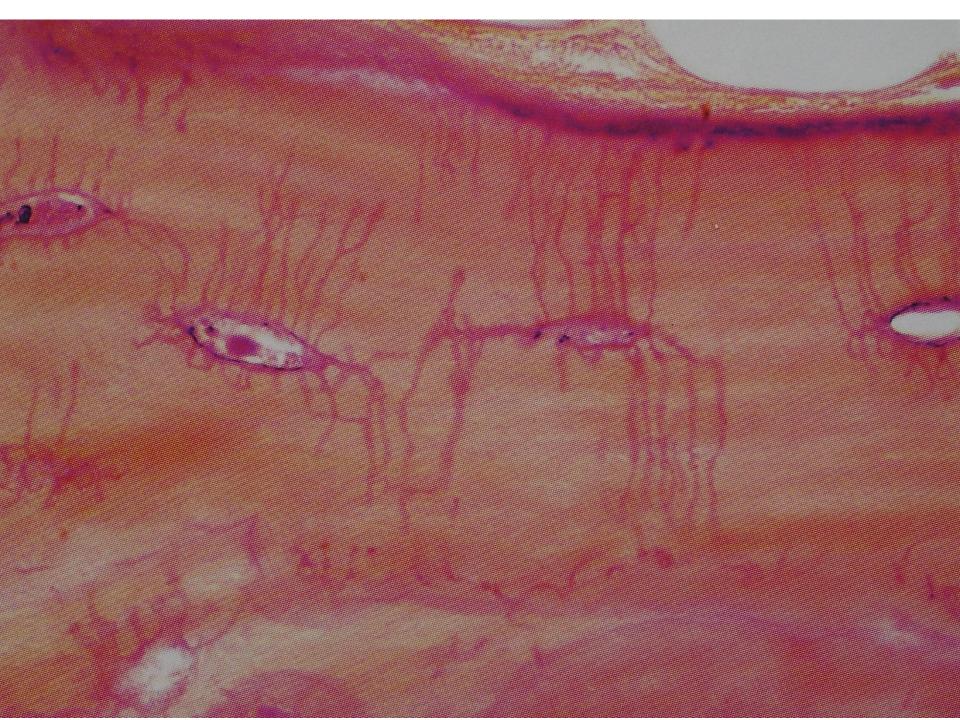
Orthopaedics

- Ortho.
- Paedic.
- Trauma.



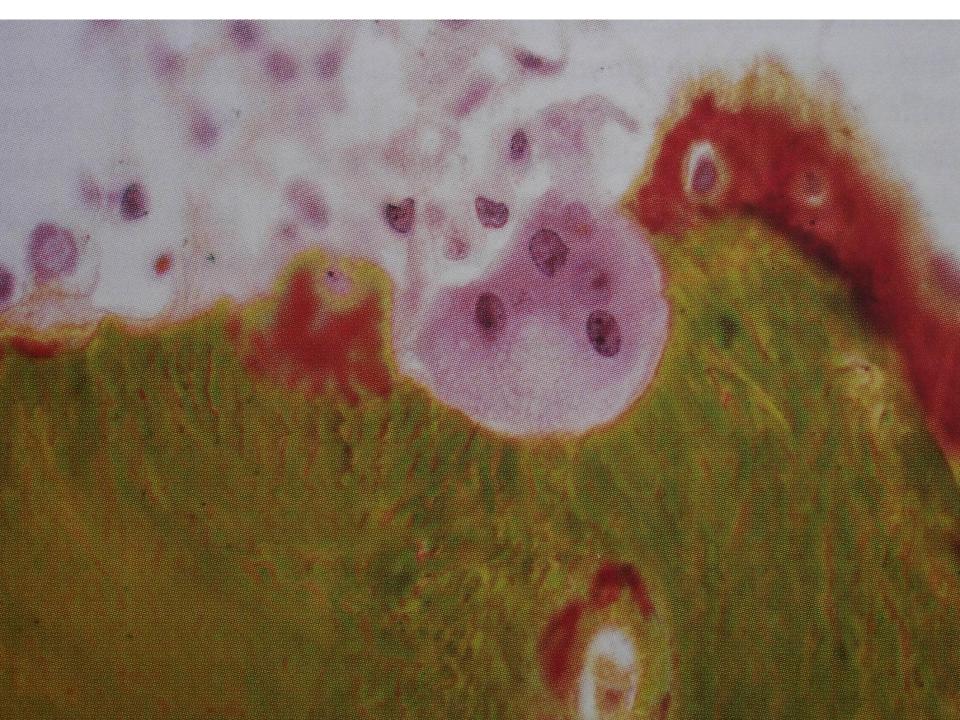
- Quality of life.
- Pain.
- Deformity.
- Loss of function.

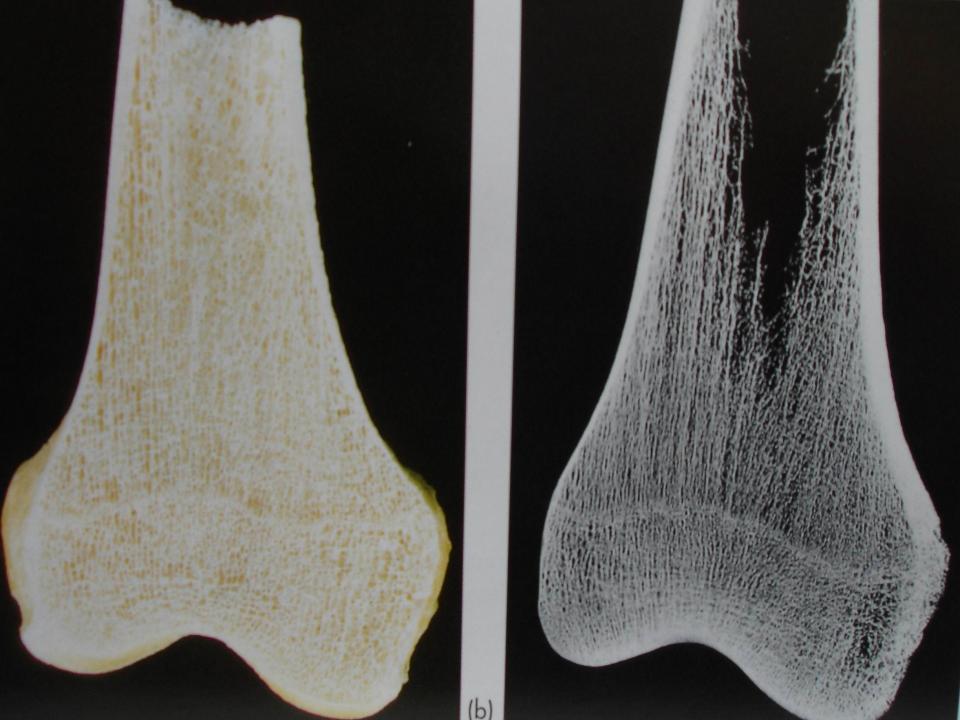


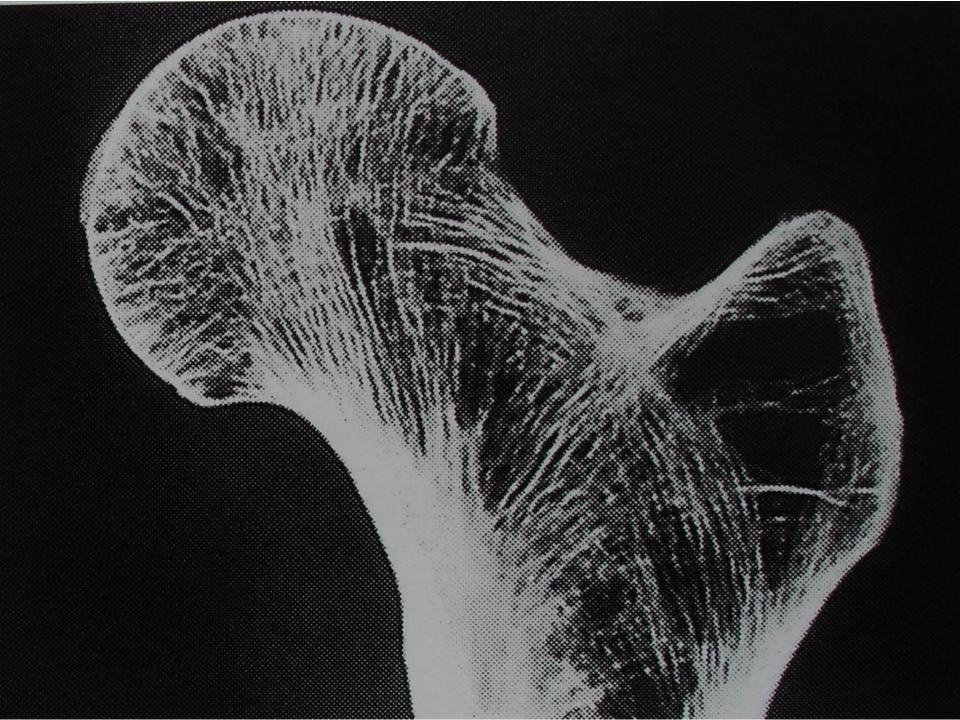


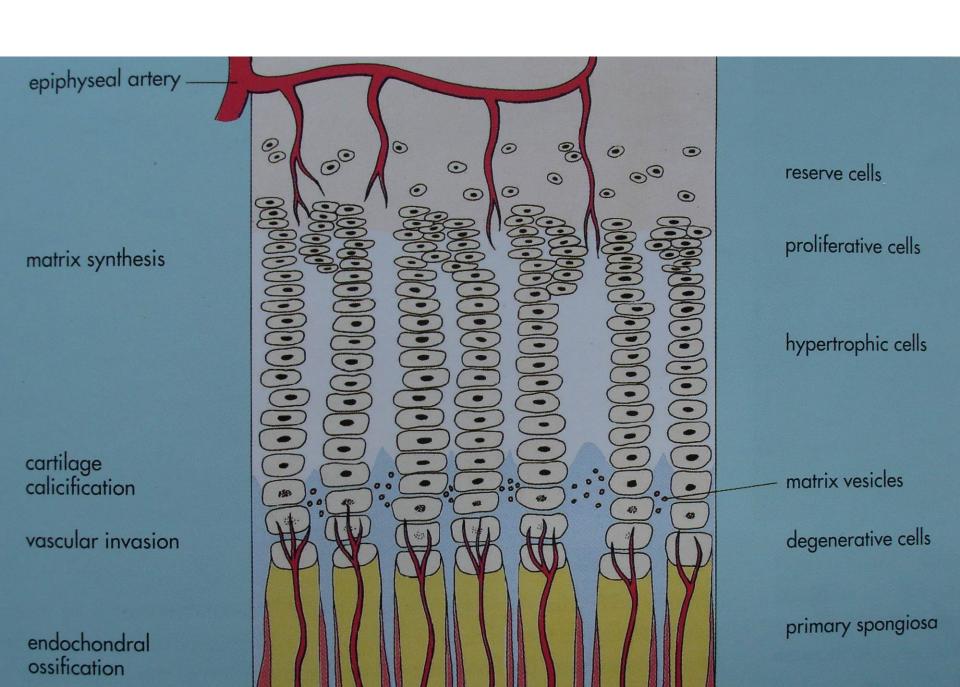












Examination

- Look.
- Feel.
- Move.

Look:

- Deformity.
- Muscle waisting.
- Scars.

Feel:

- Temprature.
- Tenderness.
- Masses.
- Anatomical landmarks.

Move:

- Active.
- Passive.

Causes of Orthopaedic diseases

Congenital

1-Genetic 2-Drugs

3-Radiation

Developmental

CTS

Tendons

DDH

Acquired

Trauma Infection

Paralysis

Arthritis

Neoplasm





- Faulty gene 30%
- * Environmental
- Teratogenic agents
- * Syndromatic
- * Unknown 60%

1-ThalidomideTragedy - 1960s

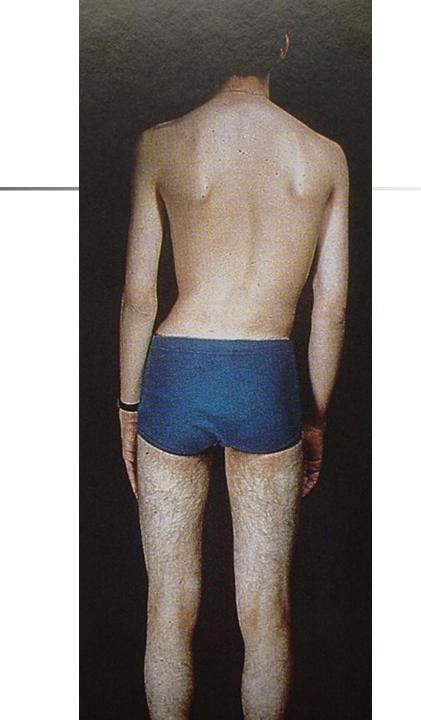
2-Chernobyl





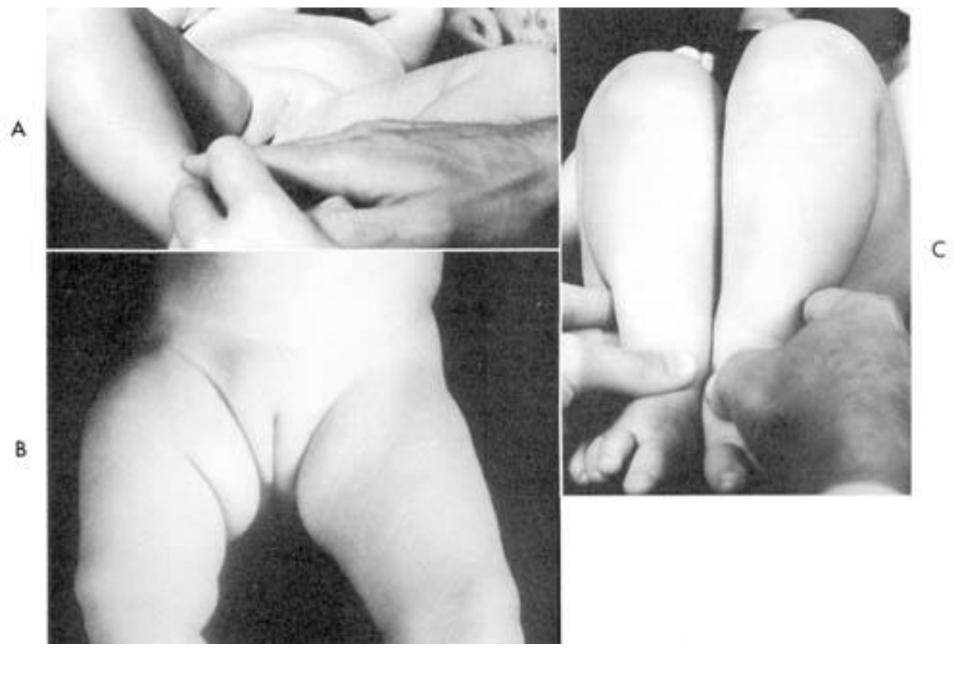




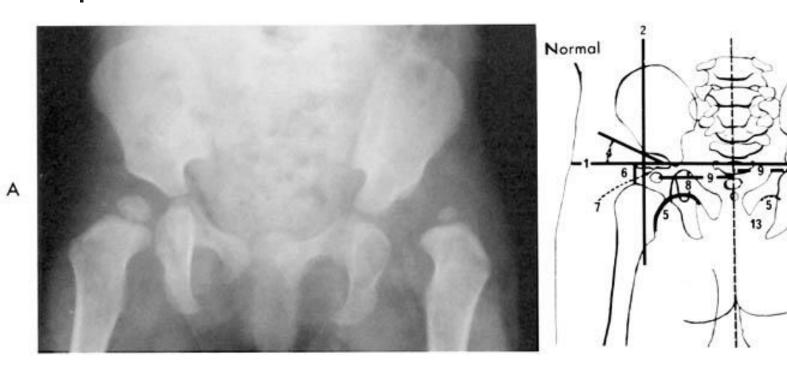












Dysplastic

Rheumatic:



BROOKS, PAULINE MRN 0093978 *29-Jun-34



Hand Lat Cu none KV 45.0 MAS 1.97 DAP 0.5 EXI 362

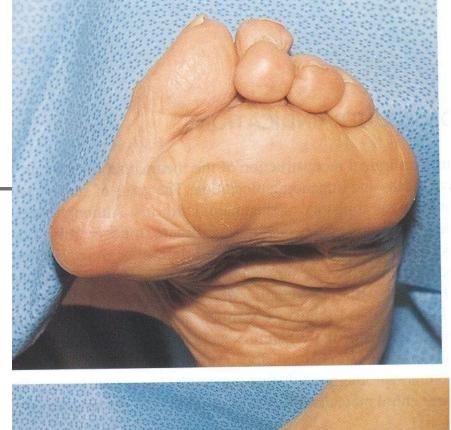
BROOKS, PAULINE MRN 0093978 *29-Jun-34

8 AM 02-Sep-04 TA 11:15:



Scale 100% W 2

St.James's Hos

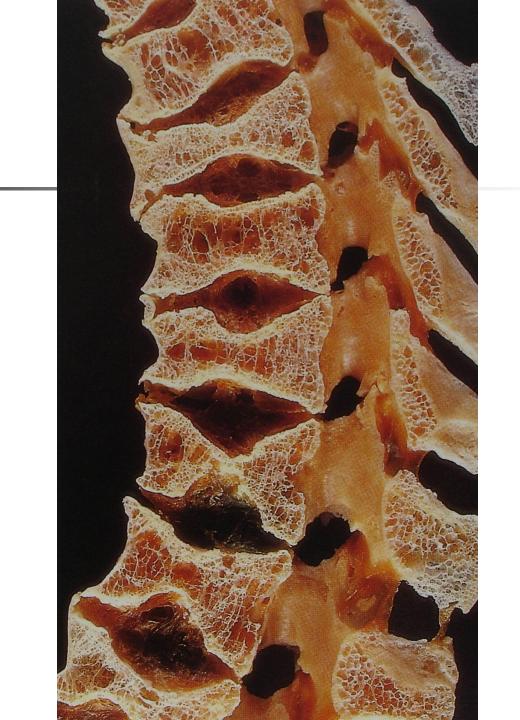


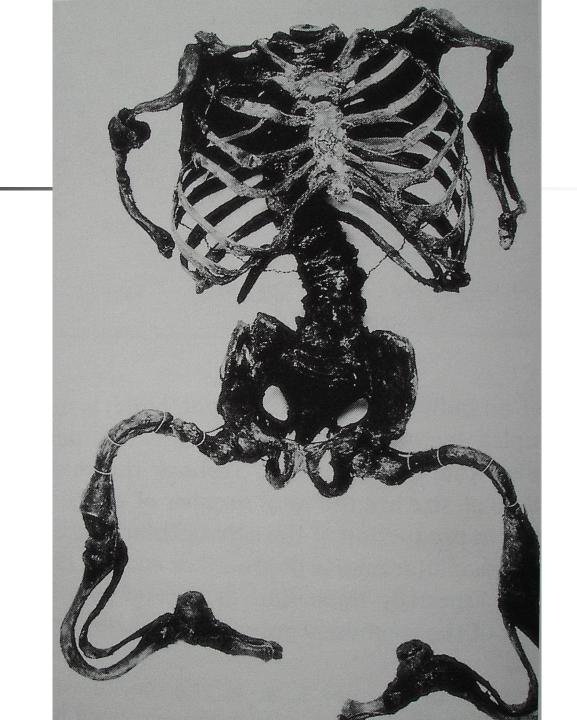






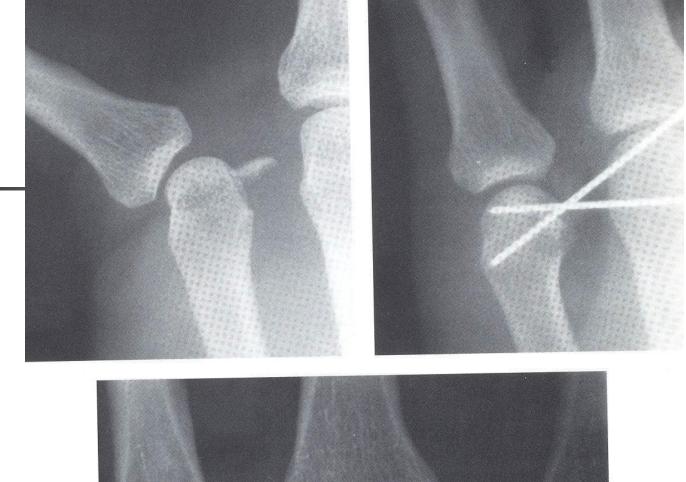
Metabolic:





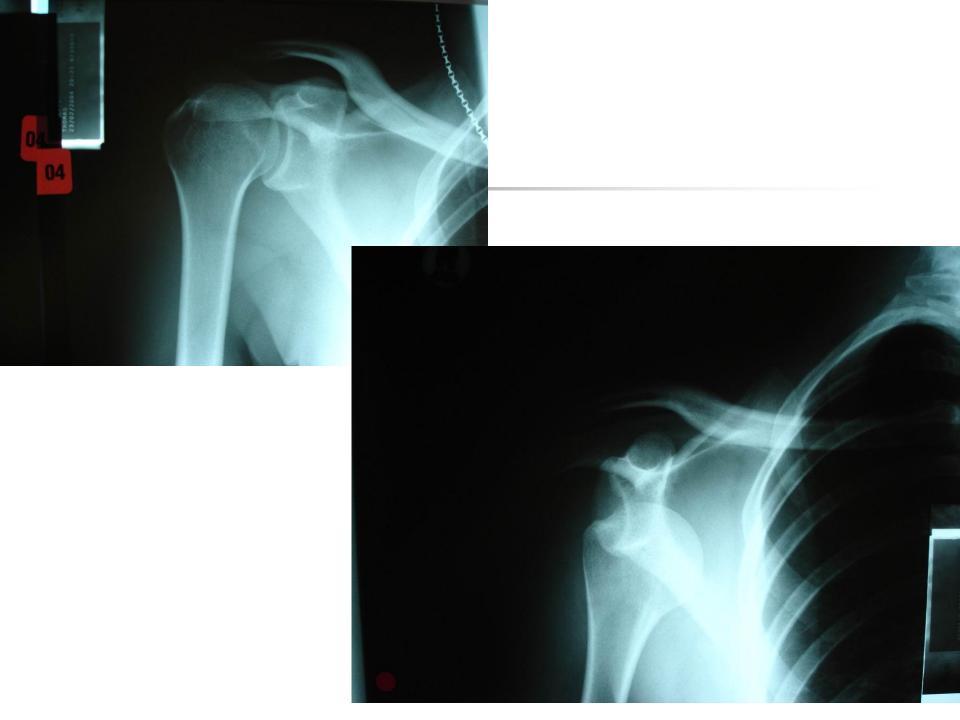
Traumatic:



















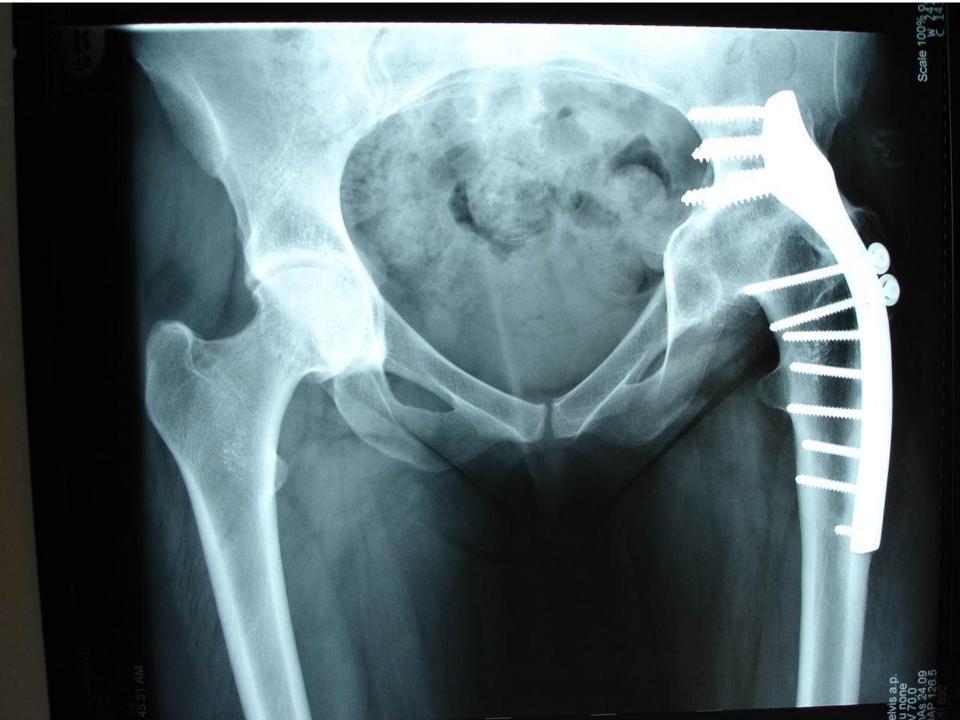


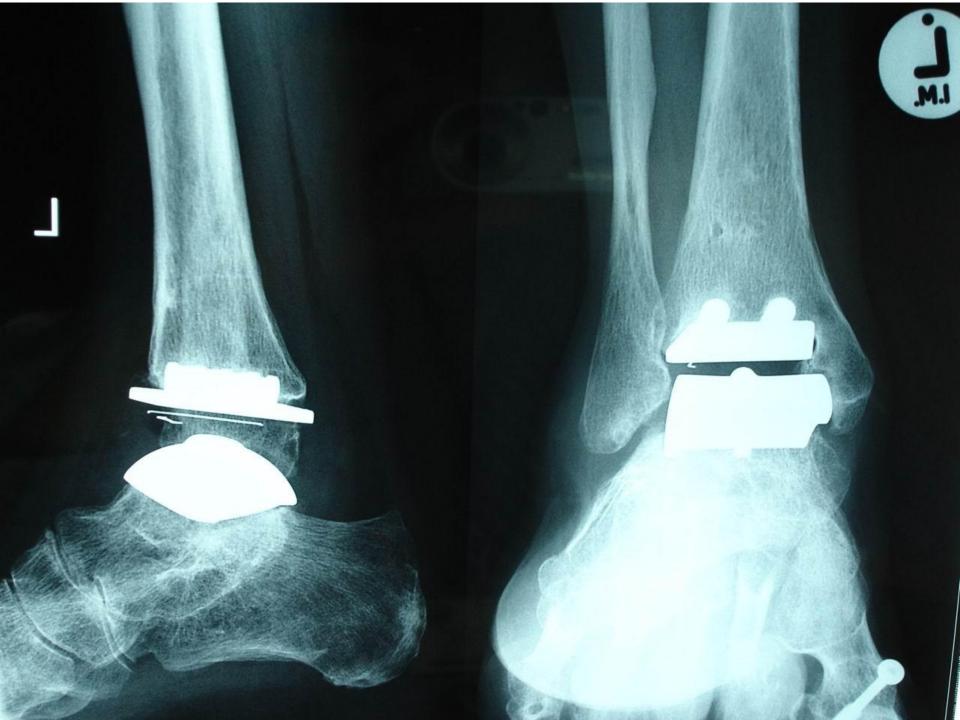


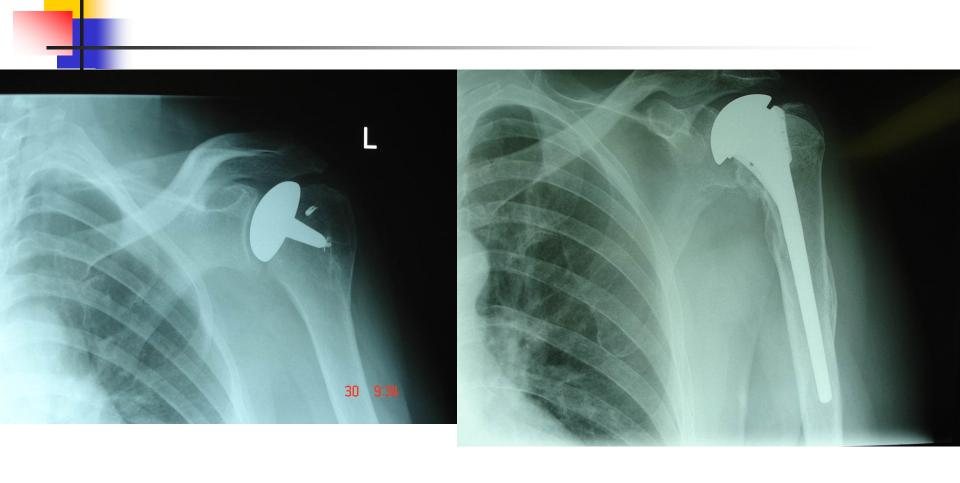






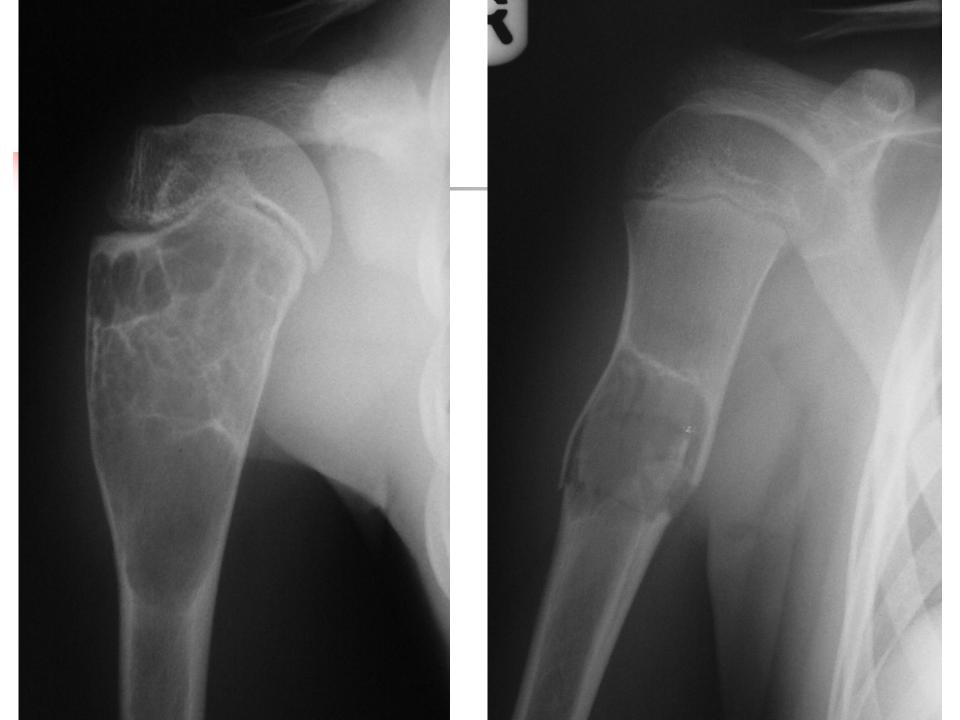


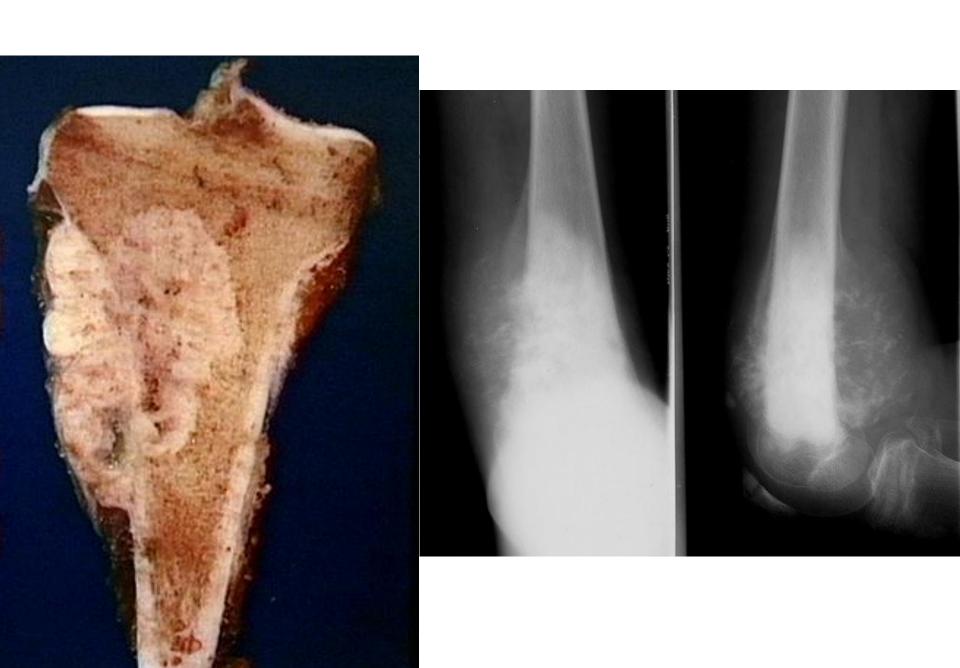




Neoplastic:



















- No patient ever died of a broken bone
- While the expert and expeditious care of orthopaedic trauma directly bears upon the patients morbidity and eventual functional recovery, the question of patients survival must be addressed prior to any orthopaedic consideration.

Life, limb, wound, fracture.



- ATLS program.
- Treat the greatest threat to life.
- The lack of definitive diagnosis should never impede the application of an indicated treatment.
- Detailed history was not essential to begin the evaluation and treatment.
- ABCDE.



- Description of fractures
- 5.6 million fractures/year, 5-10%.
- Fracture: discontinuity of bone.
- Fractures can be categorized in several ways, pathologic or traumatic, stress, location in bone, mechanism of injury, status of soft tissue...etc.



- Classification by anatomical location.
- Epiphysis.
- Metaphysis.
- Diaphysis.
- Capsule.
- Articular surface.
- Growth plate.

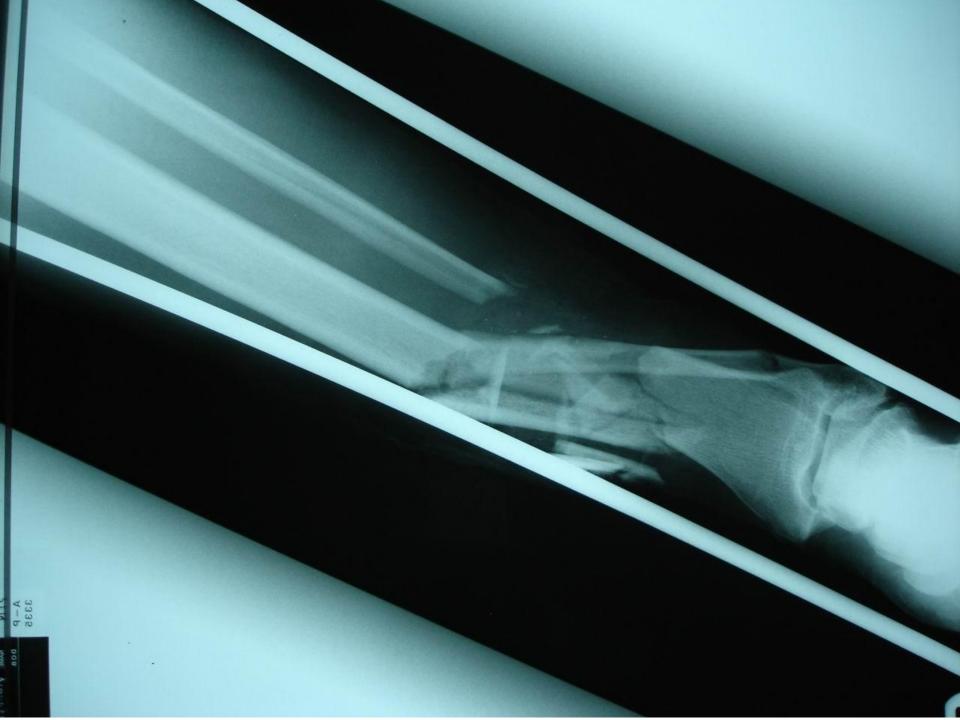








A









- Description of the deformity:
- Distal segment.
- 3 planes: axial, Sagittal, coronal.
- Displacement and angulation.
- 2 views, 2 joints, 2 limbs, 2 positions,2 occasions.
- Initial X-ray: personality of the fracture.

Clinical features of fractures:

- Pain and tenderness.
- Loss of function.
- Deformity.
- Attitude.
- Abnormal mobility and crepetus.
- Neurovascular injury.
- X-ray findings.

Treatment



Reduction: any dislocation is an emergency.

closed or open.

Immobilization:

traction, cast, external fixation, internal

fixation.

Rehabilitation.



Healing calendar.

Upper limb, child: 3 weeks.

lower limb: X2

adult: X2

femur: X2

consolidation: X2

Complications

- Bone healing abnormalities:
 - Delayed union: free movement at 3-4 mo.
 - -Nonunion: no radiographic evidence of union with clinical motion & pain 6 mo.
 - -Malunion: bony healing in an unacceptable position in any plane.
 - AVN: disruption of blood supply lead to nonunion, collapse, OA.