Segond fractures, Diagnosis and treatment

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Primary injury / plain X ray information
Segond fractuur
Hypothesis

- Avulsion lesions are a possible goal for refixing important lateral structures.
- The same approach we have for lateral fibula and tibial spine avulsion fractures.
Ultrasound imaging

- 88 patients with ACL #
- 25 Segond lesions
- 70 Impaction # lateral FC
US ALL ligament and #
Imaging Segond avulsion

- Incidence in MRI 3% Resnick USA 6% AUS
- Incidence in X ray CORR Hess D 9%
- Incidence ultrasound 28% (ICONE)

- Higher velocity trauma?
- Refixation / Feagin:
Laxity check
Rotation

Perform the rotation test at 90°. BLUE pedal to stop the acquisition.
Peroperative imaging
lift off lateral meniscus
Data

- 18 patients / knees.
- Segond fracture with intra operative signs of displacement.
- Preoperative marking # on the skin.
- Staple fixation.
- 5 cases with navigation.
Case Report : Refixing ALL / Segond #

Checking the pivot on the table is pulling the staple off / prove of importance in stability?
Refixing Segond or reconstruction AL complex?
Conclusion

• Validation study
• Importance of diagnosis (5>9>28 % )
• Ultrasound imaging ( increases 5x incidence )
• Distal avulsion lesions refixation in stead of reconstruction ?
• Clinical outcome ?