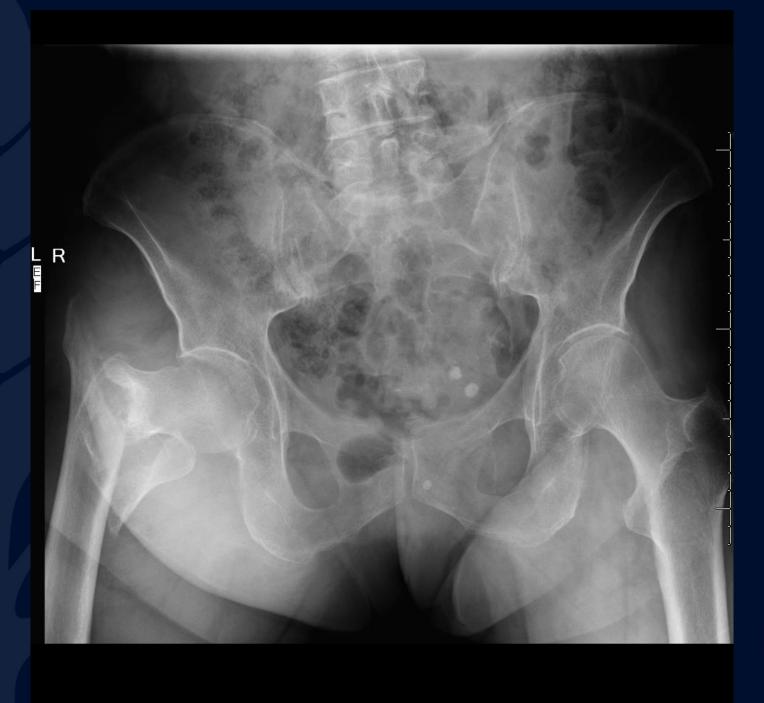
67-year-old female with hip pain status post fall

John J. DeBevits IV, MD Daniel E. Marrero, MD















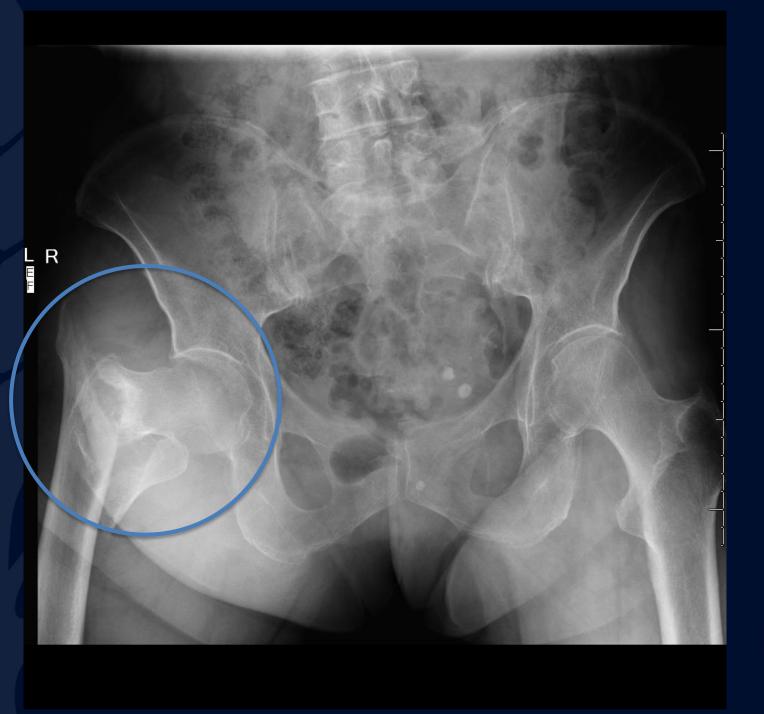
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Intertrochanteric fracture











Intertrochanteric fracture

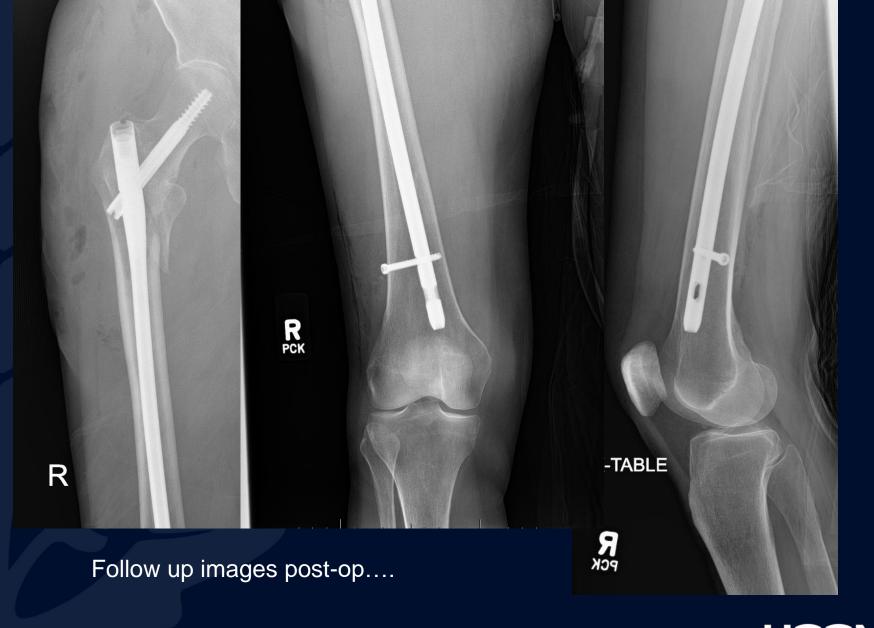
- Fracture extending along intertrochanteric line from greater to lesser tuberosity
- Reverse obliquity fx originates above lesser trochanter and extends inferolaterally to subtrochanteric region
- Isolated lesser trochanteric fx may indicate underlying neoplasm in adults
- Typically due to fall +/- osteoporosis



Intertrochanteric Fracture Stability

- Stability classification patttern may be most reliable.
- ? Involvement of the calcar femorale
 - vertical dense bone from posteromedial aspect of femoral shaft to posterior portion of femoral neck
- Stable
 - Intact posteromedial cortex
 - Resist medial compressive force when reduced
- Unstable
 - Involvement or comminution of the posteromedial cortex
 - Will collapse when loaded
 - Examples of unstable fractures
 - Large posteromedial fragment (displaced lesser troch)
 - Subtrochanteric extension
 - Reverse obliquity (oblique fracture line extending from medial cortex both laterally and distally)

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References

- Ahn J, Bernstein J. Fractures in brief: intertrochanteric hip fractures. Clin. Orthop. Relat. Res. 2010;468 (5): 1450-2
- Orthobullets

