

# TOS NEWSLETTER



**Dr. G. Mukesh Mohan**  
*President TOS*



**Dr. J. Terrence Jose Jerome**  
*Secretary TOS*

## Welcome Message

Dear Orthopods of TOS,

I am delighted to write the foreword for the 3rd Trichy Orthopaedic Society Newsletter. TOS is a vibrant society, first of its kind in Tamilnadu. It has very eminent members some of whom have laid the foundation in yesteryears for orthopaedic and Trauma surgery to flourish in Trichy. Today, variety of orthopaedic surgeries are done in both Government hospitals and Private sector to a very high standard. Every month it has been made a point to conduct the TOS meeting based on a theme with an invited guest speaker, eminent in the field. By this newsletter, TOS takes pride in sharing some of the work done by its members, achievements and their experience. Happy reading.

Looking forward  
**Dr. K. Balasubramanian**  
Sr.Consultant, Orthopaedic Surgery  
*Apollo Speciality Hospital, Trichy.*

# March monthly meeting of Trichy Orthopedic Society:



## TRICHY ORTHOPEDIC SOCIETY

Cordially invite you for the March month's TOS meet on 18th March 2023 (18.03.2023).  
Venue: Hotel Marvic, Old Palpannai, Kamaraj Nagar, Tiruchirappalli

### Theme : Pediatric Orthopaedics

| S.NO | TOPIC                                                                                                                                                                                    | PRESENTED BY                                                                              | TIMINGS         |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-----------------|
| 1    | தமிழ்த்தாய் வாழ்த்து                                                                                                                                                                     |                                                                                           | 8.00 pm         |
| 2    | Welcome address                                                                                                                                                                          | Dr. Mukesh Mohan, <i>President, TOS</i>                                                   | 8.05 - 8.10 pm  |
| 3    | Enders nail fixation in a paediatric subtrochanteric fracture                                                                                                                            | Dr. Vijayaselvan S, <i>orthopedic surgeon, BHEL Hospital</i>                              | 8.10 - 8.20 pm  |
| 4    | Paediatric radial head fractures- A case illustration                                                                                                                                    | Dr K. Balasubramanian, <i>Apollo Speciality Hospitals, Trichy</i>                         | 8.20 - 8.30 pm  |
| 5    | Case report- congenital vertical talus treated by surgical correction                                                                                                                    | Dr. K. Premkumar, <i>Fellow in Atlas hospitals</i>                                        | 8.30 - 8.40 pm  |
| 6    | Journal club<br><i>Distal Tibial Guided Growth for Anterolateral Bowing of the Tibia: Fracture May Be Prevented Jennifer C. Laine et al JBJS VOLUME 102-A NUMBER 23 DECEMBER 2, 2020</i> | Dr. Rajesh kumar L, <i>Maruthi Hospital, Trichy</i>                                       | 8.40 - 8.55 pm  |
| 7    | A Simple Reproducible Technique For The Treatment Of Chondroblastoma Of Proximal Humerus                                                                                                 | Dr. Rajesh kumar L, <i>Maruthi Hospital, Trichy</i>                                       | 8.55 - 9.05 pm  |
| 8    | Management of Adult foot deformity -a case report                                                                                                                                        | Dr. G. Mukesh Mohan, <i>Mukesh Arthro care hospital</i>                                   | 9.05 - 9.15 pm  |
| 9    | Management of Congenital coxavara ( 3 hips ) by end to side valgus osteotomy with translation and plate fixation.                                                                        | Dr Arun Kumar, <i>Final year Postgraduate, K.A.P.V Govt medical college, Trichy</i>       | 9.15 - 9.25 pm  |
| 10   | Hip Preservation Surgery- where are we in 2023?                                                                                                                                          | Dr. K. Venkatadass, <i>Senior pediatric orthopedic surgeon Ganga hospital, Coimbatore</i> | 9.25 - 9.45 pm  |
| 11   | Vote of Thanks                                                                                                                                                                           | Dr. Ramesh Prabu, <i>Joint Secretary</i>                                                  | 9.45 - 9.50 pm  |
| 12   | National Anthem                                                                                                                                                                          |                                                                                           |                 |
| 13   | Food and Beverages                                                                                                                                                                       |                                                                                           | 9.53 pm onwards |

*The judge's decision is final for the Best Postgraduate Presentation for the March monthly meeting.*

**Dr. G. Mukesh Mohan**  
*President TOS*

**IOA president theme**  
*Strong Bone Stronger Nation*

**Dr. J. Terrence Jose Jerome**  
*Secretary TOS*

**TNOA President theme**  
*Imbibe Technology - Inspire youngsters*

**Dr. I. Geethan**  
*Treasurer TOS*

The monthly meetings witnessed an outstanding academic and social evening with a theme-based monthly meeting and CME

## “ PEDIATRIC ORTHOPEDICS.”

Special thanks to Dr. K. Venkatadass for guest lecturing the meeting with a focus on hip preservation surgery in pediatric hip disorders culminating in a valuable HOPE ( Hip optimization procedures)

The day was glorified equally by our member's presentation on pediatric orthopedic fractures, hip fractures, coxa vara surgeries, proximal humerus lesions, radial head fractures, and foot deformities

Sincere appreciation to all members who participated this evening, the President and the EC members of TOS and TNOA, the backbone behind the success

This day went well, with tremendous learning and fun



# FRACTURE SHAFT OF RADIUS :

## ORIF WITH PLATE FIXATION BY WALANT

*(Wide-Awake Local Anesthesia No Tourniquet)*



Dr G. RAMESH PRABU,MS (Ortho)  
Associate Professor,  
Dept. Of Orthopaedics,  
Nagapattinam Govt Medical College & Hospital,  
Nagapattinam.

WALANT is a surgical technique that relies on local anaesthetic and hemostatic agents to provide conditions suitable for hand and forearm surgery without sedation and tourniquet.

### Case Presentation:

A 45 years old female patient was admitted with history of RTA. Radiograph showed fracture shaft of radius right forearm. Open reduction and internal fixation (ORIF) with volar plating done by WALANT

### Surgical Procedure:

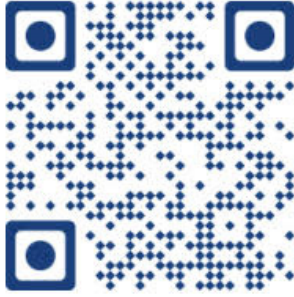
The solution I used in the WALANT technique consisted of 1 ml of epinephrine(1:1000), sodium bicarbonate one ampule and 30 ml of 2% lignocaine, which were mixed with 50ml of normal saline. The prepared above solutions were administered 20 minutes before skin incision. I started with haematoma block via a 3-5 ml, then subcutaneous injection for volar plating. Injections from proximal to distal wherever the incision. In this way, nerve endings will be blocked by local anaesthetic and the process will be painless. Then injected 3- 5ml of solutions over the periosteum lateral, volar and dorsal aspect of radius 5 cm proximal and distal from fracture site. I have done volar plating through the Henry volar approach.



PREOP XRAYS

INTRA OP IMAGES

POST OP XRAYS



SCAN THE QR CODE AND SEE THE VIDEO

## Conclusion:

WALANT for distal and shaft of radius fracture ORIF is a method to control blood loss by the effects of local anesthesia mixed with hemostatic agents. Without a tourniquet, the procedure prevents discomfort caused by tourniquet pain. Without sedation, patients could perform the active range of motion of the injured wrist to check if there is impingement of implants. It eliminates the need of numerous preoperative examinations, postoperative anesthesia recovery room care, and side effects of the sedation

## Members achievement:

**Dr. J Terrence Jose Jerome published four original articles this month**

1

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## Adductor Branch of Terminal Divisions of the Ulnar Nerve Transfer to the Thenar Motor Branch in a High Median Nerve Palsy

A Case Report

J. Terrence Jose Jerome,  
MBBS, FRCS(G), DNB, FNB (Hand & Micro), European Diploma Hand Surgery, FICS, PGDMLE(National Law School)

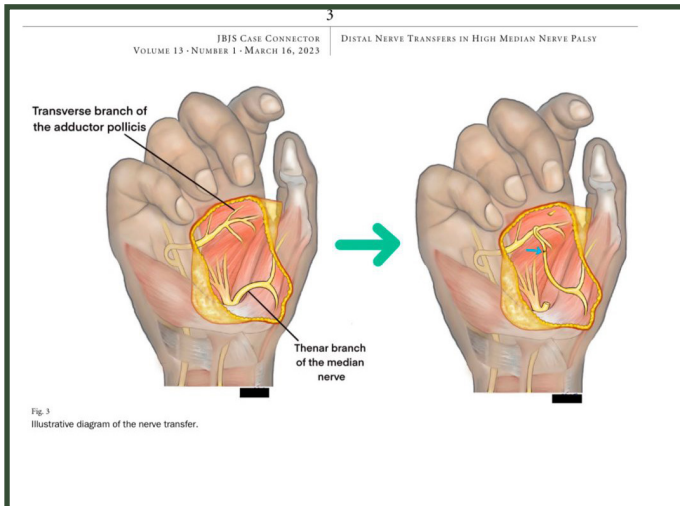
*Investigation performed at Olympia Hospital and Research Centre, Trichy, Tamilnadu, India*

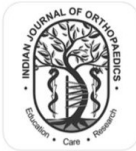
### Abstract

**Case:** The author reports a 4-month-old high median nerve palsy in a 19-year-old man with right forearm fractures, stabilized with dynamic compression plates and screws. Surgical exploration revealed a large median nerve neuroma in the midarm that was excised, and the gap was bridged with sural nerve cable grafts. The extensor carpi radialis nerve was transferred to the anterior interosseous nerve in the forearm. The adductor branch of terminal divisions of the ulnar nerve was transferred to the thenar branch of the median nerve in the hand.


**Conclusions:** The adductor branch of ulnar nerve transfer to the thenar motor branch in high median nerve palsy efficiently restored thumb opposition in 10 months of follow-up. In addition, the patient's grasp and pinch improved, preserving thumb adduction.

## Dr. J Terrence Jose Jerome was the Guest Editor for the Indian Journal of Orthopaedics and published a “Special issue on Hand Surgery”





### Indian Journal of ORTHOPAEDICS



Dear Dr. J. Terrence Jose Jerome

Greetings from Indian Journal of Orthopaedics (<https://www.springer.com/journal/43465>) the official publication of Indian Orthopaedic Association.

I welcome you as the Guest Editors for a special issue on “Hand”. You are being offered the Feb 2023 issue. You may choose to have another guest editor with you, the name which comes to me is Dr. Anil Bhat. You also make the issue more subject specific, if “Hand” appears too broad. The timelines of publications are such that the content needs to be ready two months prior to the Issue month.


**Issue Timelines Feb 2023**

|                                                                       |                                              |
|-----------------------------------------------------------------------|----------------------------------------------|
| Online release date:                                                  | First week January 23                        |
| Completion of peer review process of Manuscripts:                     | First week Dec 2022                          |
| Completion of submission of all manuscripts planned to the journal:   | First week Nov 2022                          |
| Offer given to authors who accept to contribute for issue is 6 weeks: | 1 <sup>st</sup> Sept to 15 <sup>th</sup> Oct |
| Proposed/Planned Table of contents to be ready by:                    | 30 <sup>th</sup> August 2022                 |

**Suggested Plan:**

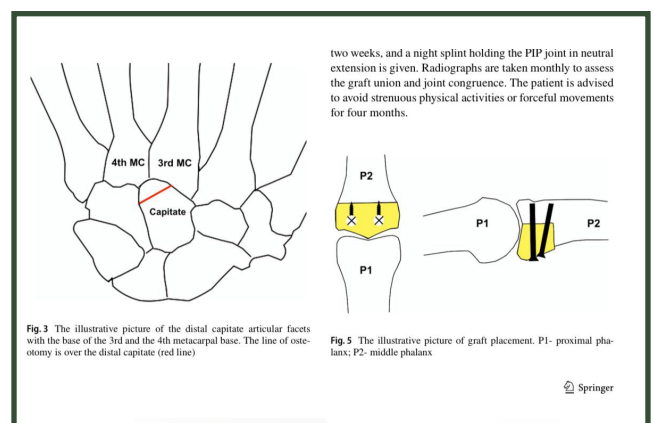
Ten manuscripts, a mix of Systematic Review and Original Articles. In the coming months any manuscripts accepted on “Hand” will be kept on hold for this issue. A mix of Indian and international Authors, half each. No Author should have name in more than two manuscripts.

With Best Wishes



Date: 9<sup>th</sup> August, 2022

Prof. Lalit Maini, Editor In Chief



# Dr.N.Rajkumar. MS.DNB.MNAMS.Dip(AO SPINE) Dip(SICOT)

Assistant professor-orthopedic surgery, DSMCH -Perambalur

Consultant orthospine surgeon has been Awarded **DIPLOMA AO SPINE** (Global diploma certificate), **LIFE MEMBER IN ASIA PACIFIC SPINE SOCIETY** (APSS) and published an article in **IJSM**



ORTHOPEDIC SURGERY | ORIGINAL ARTICLE

## FUNCTIONAL OUTCOME OF INTERTROCHANTERIC FRACTURES TREATED BY PROXIMAL FEMORAL NAIL ANTIROTATION

Vignesh Ramevel<sup>a</sup>, Senthilkumar Velayutham<sup>b</sup>, Vijayanand Rr<sup>c</sup> and Rajkumar Nallan<sup>1,c</sup>

<sup>a</sup> Asst Prof, Ortho Dept, Smmch, Chennai, <sup>b</sup> Senior Asst Surgeon, Govt Headquarters Hospital, Perambalur, Tamil Nadu, <sup>c</sup> Asst Prof, Ortho Dept, Dhanaakshmi Srinivasan Medical College, Perambalur, Tamil Nadu.

**ABSTRACT Introduction:** Intertrochanteric fractures are commonly encountered in the elderly population. Nearly half of the fractures are unstable. Surgical fixation is mostly preferred due to early mobilization and to avoid complications of conservative treatment. Unsatisfactory results with extramedullary fixation led to the rise of intramedullary devices. This study aims to analyze the effectiveness and pitfalls of Proximal Femoral Nail Antirootation (PFNA) in treating unstable intertrochanteric fractures. **Methods:** This prospective study was conducted in our hospital from October 2017 to January 2019. A total of 20 patients (13 males, 7 females) above 50 years of age having unstable intertrochanteric fractures were treated with Proximal Femoral Nail Antirootation. About 75% of injuries occurred due to trivial falls. The mean interval between trauma and surgery was 3.95 days. All patients were treated by closed reduction. The study participants were followed up for six months and were assessed using Harris Hip Score. **Results:** The anatomical reduction was achieved in 16 patients. In one case, postoperative complications include superficial infection, lag screw back out, and delayed union. The average time of union was 14.6 weeks. However, by the end of six months, good to excellent results were seen in 80% of patients. In addition, 75% of patients returned to a pre-injury functional level. **Conclusion:** PFNA gives optimal fixation for intertrochanteric fractures, with good preoperative planning and intraoperative reduction. In addition, it's the ideal implant for the osteoporotic elderly population as it provides good cancellous bone compaction, less operative time and blood loss compared to other fixation methods.

**KEYWORDS** Intertrochanteric Fractures, Proximal Femoral Nail Antirootation, Harris Hip Score

are almost always associated with trivial falls. The incidence is expected to double by 2040.<sup>1</sup>

Most Intertrochanteric fractures are unstable due to increased age and low bone mineral density. Osteoporosis is an important factor because fixing proximal fragments depends primarily on the quality of cancellous bone present.<sup>2</sup>

Surgical fixation of unstable Intertrochanteric fractures poses a constant challenge. Unsatisfactory results while using Dynamic Hip Screw (DHS) for unstable intertrochanteric fractures led the way to the development of intramedullary devices like PFN and PFNA.

This study aims to assess the effectiveness and drawbacks of the newer intramedullary fixation device PFNA in treating unstable intertrochanteric fractures.

### Introduction

Intertrochanteric fractures are the most frequent fractures of hip joint. This is attributed to the increase in the elderly population in our country, along with osteoporosis being prevalent in these populations. These fractures are found to be more common in females, almost three to four times. Intertrochanteric fractures

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<sup>1</sup>Corresponding author: Rajkumar Nallan (muralorth@gmail.com)

Rajkumar Nallan et al./International Journal of Surgery and Medicine (2023) 9(1):34-36



AO  
SPINE

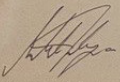
# Global Spine Diploma

## Dr Rajkumar Nallan

has successfully completed the Global Spine Diploma Program.

The Global Spine Diploma Program is a training course within all pathologies for the management of patients with spinal disorders.\*

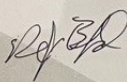
Davos, February 1, 2023



Asdrubal Falavigna  
AO Spine International  
Board Chairperson



Emre Acaroglu  
AO Spine Education  
Commission Chairperson



Richard Bransford  
AO Global Spine Diploma Exam  
Chairperson



Bryan Ashman  
AO Global Spine Diploma  
Program Chairperson

Dr Thamilselvi and Dr Mathivanan has done the Kuari pass  
winter trek on March 2023





## Upcoming Meetings: CME- Research and Methodology



**Trichy Orthopaedic Society (TOS) & IMA, Tiruchirappalli**

**CME**  
Research & Publications

 **23 April, Sunday 2023**

 **9 am -12 pm**

 **Mukesh Arthro Care Hospital, Trichy**

*\* TNMC Credit Points Awaited*

**Dr. G. Mukesh Mohan**  
IMA Secretary, Trichy

**Dr. J. Terrence Jose Jerome**  
TOS Secretary, Trichy


*We welcome you all to the CME on Research Methodology on 23 April, Sunday 2023, from 9 am -12 noon at the Mukesh Arthro Care Hospital, Trichy*

IMA Trichy and Trichy Orthopaedics Society (TOS) combined in this meeting and shall focus on

1. *Bring your problems- we have solutions regarding writing and publications*
2. *Why research and publish?*
3. *Formula to convert thesis to an article*
4. *What not be done in preparing a manuscript?*
5. *Reviewing the article - what's for me?*
6. *Personal interactions with eminent faculties*

Dr. G. Mukesh Mohan  
IMA Secretary, Trichy

Dr. J. Terrence Jose Jerome  
TOS Secretary, Trichy

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