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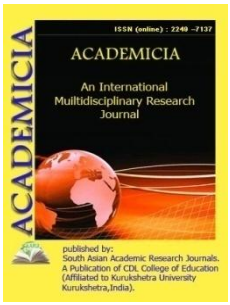

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CAUSES OF TIBIAL FRACTURE CONSOLIDATION DISORDERS IN EXTRAFOCAL COMPRESSION-DISTRACTION OSTEOSYNTHESIS AND WAYS TO PREVENT THEM

Sadulla Yusupovich Ibragimov*; Nurali Fayzievich Eranov; Ilhom Gulomovich Juraev***; Asliddin Amiriddinovich Umarov****; Gayrat Tursunovich Amonov*****

*Associate Professor,
Department of Traumatology and Orthopaedics,
Samarkand State Medical Institute, UZBEKISTAN

**Assistant,
Department of Traumatology and Orthopaedics,
Samarkand State Medical Institute, UZBEKISTAN

***Assistant,
Department of Traumatology and Orthopaedics,
Samarkand State Medical Institute, UZBEKISTAN

****Resident physician,
Republican Specialised Scientific and Practical Medical Centre for Traumatology and, Orthopaedics, UZBEKISTAN

*****Resident physician,
Republican Specialised Scientific and Practical Medical Centre for Traumatology and, Orthopaedics, UZBEKISTAN

ABSTRACT

This article presents the results of treatment of 540 patients with tibia fractures using Ilizarov compression-distraction osteosynthesis. The patients were divided into two groups. The first group included 486 patients who underwent one-stage manual repositioning of fractures and fixation with the Ilizarov apparatus of 4 rings. The fragments remaining after displacement were gradually repositioned in the apparatus. 80% of the fractures healed in time, and 20% of the patients had poor consolidation, no fracture heal and false joints. The second group consisted of

54 patients. They underwent complete repositioning of the fragments under EOP control and were fixed in an Ilizarov apparatus of 4 rings. In the second group of patients, special attention was paid to complete fracture repositioning and rigid fixation in the apparatus. All patients in the second group had fracture healing in time, except for one patient who had concomitant diseases such as third-degree obesity and diabetes mellitus. Positive results were obtained in patients in the second group, where complete repositioning and rigid fixation of the fracture fragments were performed immediately before fracture heal.

KEYWORDS: *Tibia Fracture, Compression-Distraction Osteosynthesis, Poor Consolidation, Non-Unionised False Joint.*

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