



DYNANAIL[®]

NAIL SYSTEM

HOW WOULD YOU SURGICALLY TREAT A PATIENT WITH MULTIPLE COMORBIDITIES?

By William Adams, DPM, FACFAS

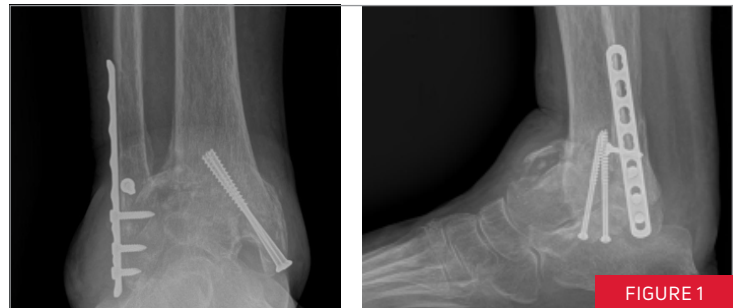
INITIAL PRESENTATION

A 52-year-old female presented with a trimalleolar ankle fracture that had previously been treated operatively (**FIGURE 1**). Her history included type 2 diabetes mellitus with chronic renal disease, COPD, and adrenal insufficiency treated with chronic steroids. Patient was initially treated with bracing, but continued to have pain and a worsening deformity.

CT images revealed an anteriorly subluxed talus with significant bone destruction in the distal tibia (**FIGURE 2**).

REVISION SURGERY

TTC arthrodesis performed using the DynaNail[®] with cortical fiber bone graft and amniotic tissue applied across the joints. A medial malleolar stress fracture occurred during the surgery.



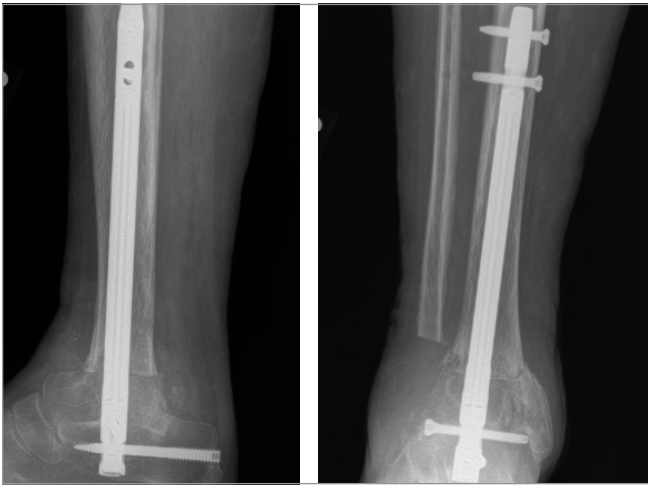
Pre-operative radiographs



Pre-operative CT scans

1 WEEK POST-SURGERY

DynaNail's Compressive Element was holding 2.1 mm of compression, meaning the joints had experienced 3.9 mm of resorption or settling since surgery.



8 WEEKS POST-SURGERY

Patient began partial weight-bearing progressing to full weight-bearing in boot. DynaNail's Compressive Element was holding 2 mm of compression.



6 MONTHS POST-SURGERY

X-Rays show solid bony union and stress fracture had consolidated. Patient expressed happiness with this limb salvage procedure and avoiding amputation.



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MK-10176 Rev 02

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