



# DYNANAIL MINI<sup>®</sup>

NAIL SYSTEM

## HOW WOULD YOU TREAT AN OBESE PATIENT WITH MIDFOOT CHARCOT ARTHROPATHY AFTER FAILED MEDIAL COLUMN FUSION?

By Nicholas L. Strasser, MD

### INITIAL PRESENTATION

A 60-year-old male presented with talonavicular (T-N) dislocation, loss of medial column length, plantar dislocation of the navicular, plantar declination of the talus, and subsequent rocker bottom deformity (FIGURE 1).



FIGURE 1

Pre-operative radiographs

### SURGERY #1

The patient underwent a medial column fusion using a screw and staples. At 5 months post-surgery, radiographs revealed multiple hardware failures and nonunion of the T-N joint.

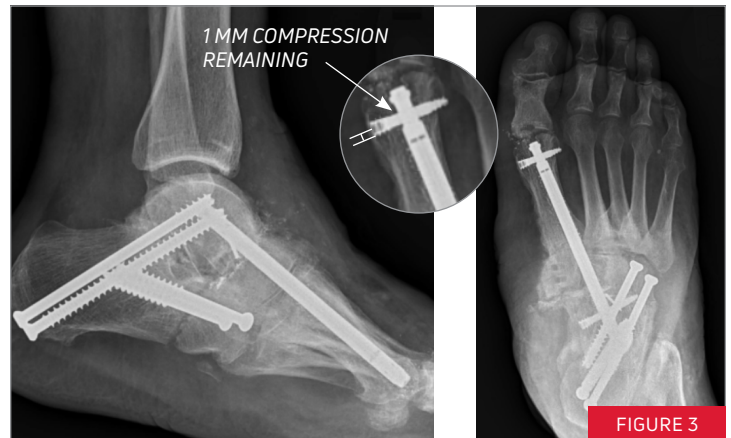


FIGURE 2

Radiographs showing failed hardware from original medial column fusion using a screw and staples

## REVISION SURGERY

Hardware was removed. A revision medial column fusion was performed using the DynaNail Mini® Fusion System and bone allograft. A 120 mm length DynaNail Mini was implanted, allowing for 4.5 mm of post-operative NiTiNOL compression. Subtalar and calcaneocuboid fusions were performed using headed screws.



### 2 WEEKS POST-SURGERY

NiTiNOL Compressive Element was holding 1 mm of compression (FIGURE 3). Patient began a progressive weight-bearing program at 12 weeks post surgery.



### 4.5 MONTHS POST-SURGERY

CT scan showed bony bridging at the T-N joint and confirmed fusion and fixation across the T-N and C-C joint (FIGURE 4). Patient continues to show substantial improvement in his foot stability and mobility. At 2.5 months post-surgery, during recovery of a cervical spine surgery, his foot was stable enough to support full weight-bearing.



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