# Going to Great Lengths for the Elderly: Magnetic Limb Lengthening Nails in Patients Older Than 60 Years

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### Introduction

- Limb lengthening is not common in the older population
- Challenges of reconstruction:
  - Reduced bone mineral density
  - Osteoporotic bone
  - Comorbidities
  - Decreased physiologic reserves
- Choices are bulky external fixation or intramedullary lengthening

# **Hypothesis**

- Using magnetic intramedullary (IM) lengthening nails in the older population will produce similar outcomes as younger population when evaluating:
  - Distraction index
  - Consolidation index
  - Maturation index
  - Adverse events

### **Methods**

- Multicenter, retrospective study (2012--2019)
- Outcomes compared to younger, diagnosismatched control groups

#### 60+ YEAR-OLD PATIENT CHARACTERISTICS

					Goal		
					Lengthening	Bone	
Patient	Sex	Age	Etiology of LLD	Comorbidities	(cm)	Operatea	
1	М	60	Congenital		6.0	Tibia	
2	F	60	Infected Nonunion	Prior infection	4.9	Femur	
3	М	60	Acquired		5.6	Femur	
4	F	61	Post-traumatic		5.0	Femur	
5	М	63	Post-traumatic		3.0	Femur	
6	М	65	Post-traumatic	Obesity	4.0	Femur	
7	F	66	Post-traumatic	Remote infection, depression	3.0	Tibia	
8	М	67	Post-traumatic		3.6	Tibia	
9	М	69	Prior knee arthrodesis	Peripheral neuropathy, CAD	1.5	Femur	
10	М	71	Post-traumatic		3.0	Femur	
11	F	72	Post-traumatic	Obesity, Prior infection	2.5	Femur	
LLD: limb length discrepancy; CAD: Coronary artery disease							

R	e	5	U	ts	

#### 349 nails (253 patients)

OLDER POPULATION (≥60 YEARS OLD)	YOUNGER POPULATION (<60 YEARS OLD)
<ul> <li>11 nails in</li> <li>11 patients</li> </ul>	<ul> <li>338 nails in 242 patients</li> </ul>
<ul> <li>Mean age:</li> <li>65 years</li> </ul>	<ul> <li>Mean age: 18 years</li> </ul>
<ul> <li>7 men</li> <li>4 women</li> </ul>	<ul> <li>177 men</li> <li>161 women</li> </ul>
<ul> <li>8 femora 3 tibiae</li> </ul>	<ul> <li>249 femora</li> <li>89 tibiae</li> </ul>

#### DISTRACTION AND HEALING PARAMETERS

	Age 60+ year (n=11)		Age<60 years, large nails (n=258)		
	Mean	95% CI	Mean	95% CI	
Distraction Days	67.5	42.5, 92.4	72.1	68.3, 75.8	
Length Achieved (mm)	40.0	27.9, 51.9	45.2	43.4, 47.1	
Consolidation Days	140.5	106.2, 174.8	144.3	135.7, 152.9	
Consolidation Index	34.1	27.7, 40.5	35.5	32.4, 38.5	
Maturation Days	68.6	48.9, 88.3	72.3	65.0, 79.5	
Maturation Index	16.9	11.6, 22.2	18.7	16.2, 21.3	

- 80 smaller diameter nails were excluded in the table above, which may influence clinical decision to allow early weight bearing.
- Healing parameters were not clinically different between the cohorts.

# **Results (continued)**

DISTRACTION AND HEALING PARAMETERS SPECIFIC AGE GROUPS							
	AGE 60+ NAILS (I MEA	YEARS N=11) IN	AGE 20 – 39 NAILS (N=55) <i>MEAN</i>	AGE 40 – 59 NAILS (N=22) <i>MEAN</i>			
DISTRACTION INDEX	0.6	5	0.69	0.66			
CONSOLIDATION INDEX	34		36	41			
MATURATION INDEX	17		19	21			
<ul> <li>Dividing the younger cohort into specific age ranges</li> <li>≥60 year old group similar to patients aged 20-39 and 40-59</li> <li>Trend toward equivalency.</li> </ul>							
COMPLICATIONS							
COMPLICATIONS	OLDER ≥60	YOUNGER AGE 7-59	YOUNGER AGE 20-39	YOUNGER AGE 40-59			
TOTAL	11	282	45	20			
% OF SEGMENTS COMPLICATIONS	64%	62%	56%	55%			

60+ PATIENT LENGTHENING OUTCOMES							
D.C.	Distraction	Length Achieved	At	0 1 1	D d		
Patient	Index	(mm)	goal	Complications	Reoperations		
1	0.47	60	Yes	Regenerate procurvatum, <u>Malunion</u>	Malunion repair		
2	0.51	44	5mm under	Sciatic neuralgia	None		
3	0.77	79	2.3cm over*	Broken nail, bent regenerate	Exchange nailing, LISS plate		
4	0.89	50	Yes	None	None		
5	0.81	30	Yes	ERC malfunction	None		
6	0.73	40	Yes	None	None		
7	0.79	30	Yes	Preconsolidation. osteomyelitis	Antibiotic coated IMN		
8	0.29	36	Yes	Delayed union	Bone marrow aspirate		
9	0.65	15	Yes	Unrelated toxic megacolon, death	None		
10	0.65	30	Yes	None	None		
11	0.57	25	Yes	None	None		

\* Patient deliberately overlengthened; ERC: External remote controller; LISS: less invasive stabilization system; IMN: intramedullary nail

# **Case Example**

- 70-year-old man with history of right femoral fracture with IM nail fixation
- Subsequent intertrochanteric femoral fracture with sliding hip screw fixation
- 3.0-cm femoral discrepancy
- Right femoral osteoplasty with magnetic IM nail lengthening
- Achieved 3-cm lengthening goal



Fig. 1. A and B: Posttraumatic radiographs of 71-yearold patient before insertion of femoral magnetic IM lengthening nail C and D: Final follow-up after consolidation of regenerate with lengthening nail in place

# Discussion

- Results appear comparable to other studies of the general population
- IM lengthening nails in older population:
  - Alternative to external fixation
  - Similar outcomes to younger population
- May allow for better quality of life
- For more information: Dr. John Herzenberg (jherzenberg@lifebridgehealth.org)

HEALING INDICES IN LITERATURE						
ARTICLE	DI	CI	MI			
	(MM/DAY)	(DAYS/CM)	(DAYS/CM)			
THIS STUDY	0.7	34	17			
Hammouda et al, J Orthop Trauma 2017		32				
Wagner et al, SICOT J 2017	0.6	36	22			
Paley et al, Techniques in Orthopaedics 2014	0.8	28				
Shabtai et al, Clin Orthop Relat Res 2014	1	27				
Horn et al, ACTA Orthopaedica 2015		45				
Rozbruch, Clin Orthop Relat Res 2008		24				
Paley, JBJS 1997		42				
Sangkaew, SICOT 2004		44				
Nakase et al, Arch Orthop Trauma Surg 2007		51.4				
Ganger et al, SICOT 2009		66				