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Introduction

- Outcomes with motorized magnetic limb lengthening nails have been reported for the general population, typically in patients who are younger than 50 years.¹
- Motorized magnetic intramedullary lengthening nails are the latest technology and were introduced in an effort to make limb lengthening easier and more comfortable.¹⁻³
- What are the outcomes, complications, and viability of lower limb lengthening in older adults using motorized magnetic lengthening nails?

Methods

- Retrospective chart and radiographic review was conducted for 5 patients (3 men, 2 women).
 - Radiographic review utilized digital films in conjunction with clinical notes to determine preoperative limb length discrepancy (LLD), amount of lengthening achieved, and the date of full distraction and complete consolidation.
- All underwent unilateral lengthening (1 tibia, 4 femora) using motorized magnetic nails.
- Mean age: 67 years (range, 63–72 years)
- Initial etiology of shortening was:
 - Trauma: 4 cases
 - Knee fusion: 1 case
- Mean lengthening goal: 3.1 cm (range, 2.5–4.0 cm)

Results

- All 5 patients completed the distraction phase and achieved their initial lengthening goal (Table 1, Figures 1–4).
- Mean follow-up after index surgery: 11.9 months (range, 5.7–21.7 months)
- Mean distraction index: 0.7 mm/day (range, 0.6–0.8 mm/day)
- Mean consolidation index: 32.4 days/cm (range, 27.6–49.6 days/cm)
- Two complications occurred:
 - 1 limb had osteomyelitis
 - Required premature nail removal
 - 1 limb was not lengthened for several days (remote controller device malfunction)
 - Treated by increasing the lengthening rate from 1 mm/day to 1.25 mm/day for 1 week.

Table 1. Demographics and Outcomes for Each Patient.

#	Etiology	Age	Gender	Side	Bone	Goal (cm)	Length achieved (cm)	Distraction index (mm/day)	Consolidation index (days/cm)
1	Posttraumatic injury	63	M	Right	Femur	3.0	3.0	0.083	30.3
2	Posttraumatic injury	66	F	Right	Tibia	3.0	3.0	0.081	23.6
3	Posttraumatic injury	72	F	Right	Femur	2.5	2.5	0.058	27.6
4	Posttraumatic injury	65	M	Left	Femur	4.0	4.0	0.074	30.8
5	Posttraumatic injury	71	M	Right	Femur	3.0	3.0	0.065	49.6

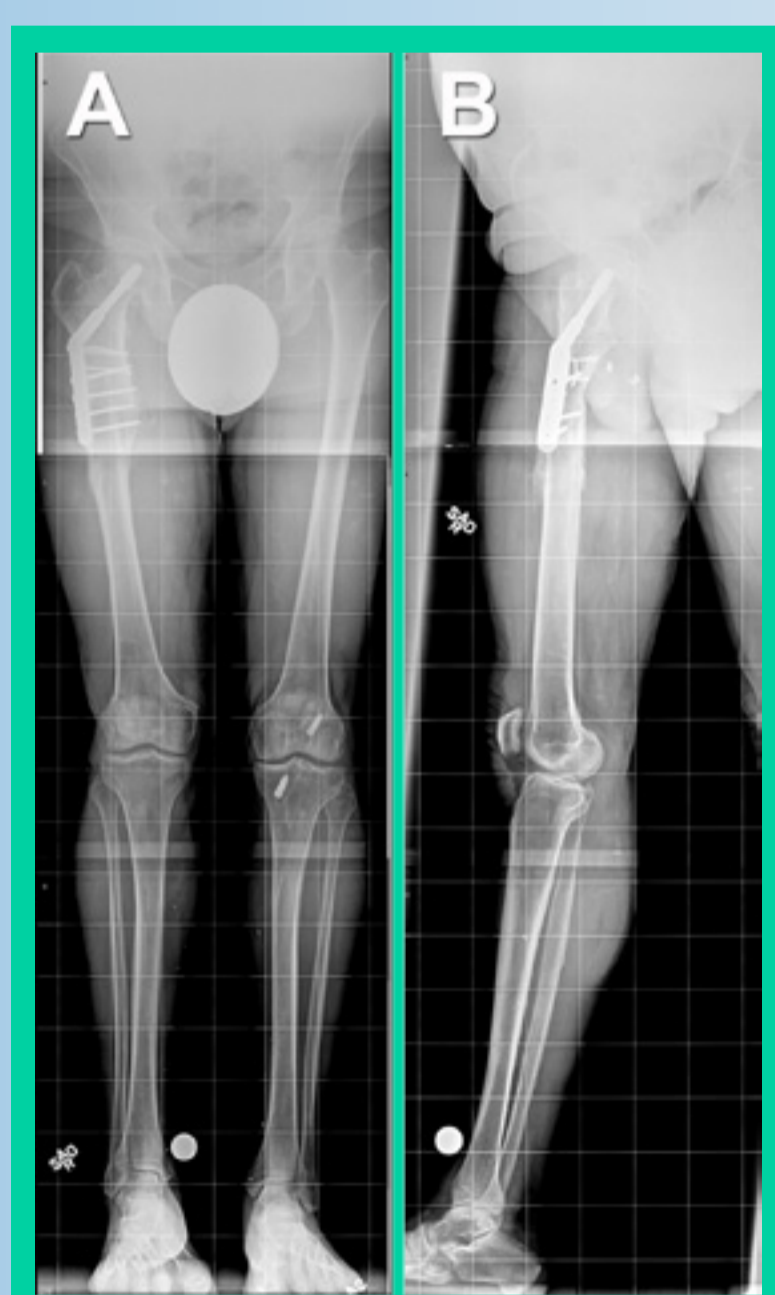


Figure 1. Posttraumatic femoral deformity in a 71-year-old patient (case number 5 in Table 1). Preoperative AP (A) and lateral (B) view radiographs of the affected femur before insertion of the motorized magnetic lengthening nail.

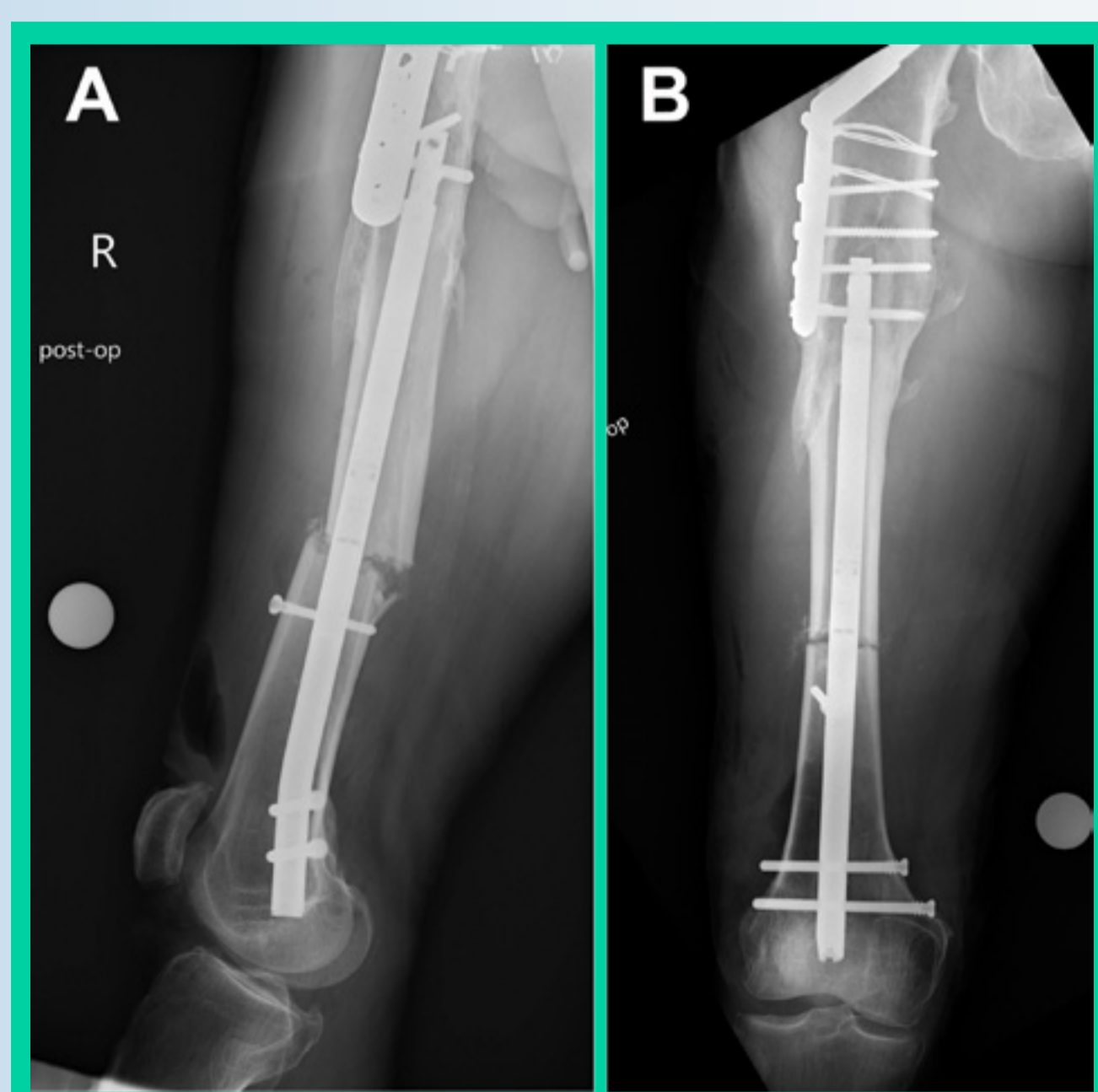


Figure 2. Immediate postoperative lateral (A) and AP (B) view radiographs of the affected femur after insertion of the motorized magnetic lengthening nail.



Figure 3. Postoperative AP (A) and lateral (B) view radiographs of the affected femur after 3-cm distraction with the motorized magnetic lengthening nail.



Figure 4. Postoperative AP (A) and lateral (B) view radiographs show complete consolidation after femoral lengthening with the motorized magnetic lengthening nail.

Discussion

- Lengthening with magnetic nails in older adults resulted in distraction, consolidation, and complication rates that are similar to outcomes reported in the general population.
- Motorized magnetic limb lengthening nails are a viable option to treat LLD in otherwise healthy individuals into the seventh and eighth decades of life.

References

1. Sabharwal S, Green S, McCarthy J, Hamdy RC. What's new in limb lengthening and deformity correction. *J Bone Joint Surg Am.* 2011;93(2):213–21.
2. Kirane YM, Fragomen AT, Rozbruch SR. Precision of the PRECICE internal bone lengthening nail. *Clin Orthop Relat Res.* 2014;472(12):3869–78.
3. Rozbruch SR, Birch JG, Dahl MT, Herzenberg JE. Motorized intramedullary nail for management of limb-length discrepancy and deformity. *J Am Acad Orthop Surg.* 2014;22(7):403.