



55th Annual Conference of Orthopedic Surgeon Society of Andhra Pradesh

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Organized by : Department of Orthopaedics, Kurnool Medical College Kurnool



INTRODUCTION

Fractures of the tibial plateau account for around 1% to 2% of all long bone fractures. There is a bimodal age distribution.

More common in males with 70% occurring in young adult men with a mean age of 43 years. The incidence of tibial plateau fracture patients admitted to a trauma center with multi-trauma has been reported between 16% and 40%. Low-energy falls are generally the predominant mode of injury in the elderly population who sustain unicondylar or bicondylar tibial plateau fractures. Pedestrians struck by a motorized vehicle (30%) and low-energy falls (22%) were the most common mechanisms of injury. These fractures create significant treatment dilemmas due to the delicacy of skin as well as potential for failure due to poor bone quality.

CASE REPORT

A 37 yrs Male

Patient was brought to the Casualty with A/H/O RTA with complaints of pain and swelling over left knee and inability to walk.

OPERATIVE FINDINGS

PRE OP X-RAY



POST OP



FOLLOW UP

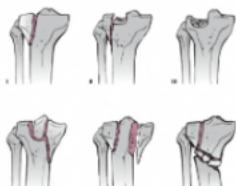


POST OP ROM



DISCUSSION

- The Bicolumnar plating provides good stability, early mobilisation of the joint and provides good range of motion.
- Posteromedial plating provides a buttress to posteromedial fragment, thereby prevents varus collapse and Anterolateral plating gives good stability to the fracture.



SCHATZKER Classification of Proximal Tibia fractures

CONCLUSION

In Proximal tibial fractures , Schatzker Type V & VI are managed with bicolumnar plating has excellent clinical and functional outcome.