STIMULAN®

Case study

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Clinical particulars

35-year-old male involved in a road traffic accident, suffered multiple injuries and subtrochanteric fracture of left femur. This was nailed, however, subsequently he developed infection and drainage from both at proximal and distal locking screw areas. He went to theatre multiple times and developed wound approx. 15cm on the proximal lateral thigh, which was treated with VAC.

He presented a year later with discharging wound proximally and distally.

Treatment

The femoral nail was removed followed by reaming of the femoral canal and wash-out procedure. 40cc of STIMULAN was used to carry the antibiotic and fill resulting dead space in the intramedullary canal. Cultures revealed infection to be $Staphylococcus\ aureus$ which was treated with vancomycin and tobramycin.

Outcome

2.5 months' post-operatively x-rays showed almost complete absorption of the STIMULAN beads and at 7 months there was complete healing of the non-union. At 1 year follow-up the patient remains infection free, walking with no pain.



Pre-operative x-ray showing non-union



Post-operative x-ray -2 months



Post-operative CT – 2 months



Post-operative – 2.5 months



Post-operative – 1 year

For indications, contraindications, warnings and precautions see Instructions for Use. Concurrent use of locally administered antibiotics may affect setting time, absorption characteristics and/ or bone formation. It is the surgeon/healthcare professional's responsibility to give due consideration to the details in the medicinal product marketing authorisation in deciding whether it is appropriate for the patient under his/her care. The relevant Summary of Product Characteristics (SmPC) must be consulted. The type and dose of medicinal substance should also be assessed according to the individual patient's clinical circumstance.

This brochure may include the use of STIMULAN or techniques that go beyond the current clearance/approval granted by the relevant regulatory authority. Please contact your local representative for further information.

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