

[Autologous fibula transplantation for reconstruction of bone defects]

U Lenze, F Pohlig, C Knebel, F Lenze, N Harrasser, H Mühlhofer, Andreas Toepfer, H Rechl & R Von Eisenhart-Rothe

The reconstruction of large bone defects following tumor resection, trauma or infection is difficult and subject to individual preferences of each surgeon. Free autologous fibula grafts are a reliable biological treatment method, whereas both a vascularised and a non-vascularised transplantation is possible. The use of either treatment option - vascularised or non-vascularised - is accompanied by individual advantages and/or disadvantages that should be taken into consideration during the preoperative planning process. Vascularised fibula transplants should be used especially for the reconstruction of large segmental defects and in patients, in whom adjuvant chemo- and/or radiation therapy is to be administered. Non-vascularised fibula grafts - which offer the advantage of a certain regeneration potential at the donor site as well as a shorter operation time - might be beneficial for bridging hemicortical defects and segmental defects with good soft tissue coverage.

type	journal paper/review (Translation2::getLang(): unknown language "". Use Translation2::setLang() to set a default language.)
date of publishing	8-2017
journal title	Orthopade (46/8)
ISSN electronic	1433-0431
pages	648-655