



DR. DE LOS MOZOS

COALICION ASTRAGALOCALCANEA

Bibliografía



Pie Plano Infantil

Eva R. Gil Monzó
Juan Pedro García Paños
Rosa Busquets Net
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JBJS REVIEWS

THE EVALUATION AND TREATMENT OF PEDIATRIC TARSAL COALITIONS

A Critical Analysis Review

Alberto Carli, MD, MSc

Elisabeth Leblanc, MD, MSc,
FRCSC

Ari Amitai, MD

Reggie C. Hamdy, MD, FRCSC

Investigation performed at the Division of Orthopaedics, Shriners Hospital for Children, Montreal Children's Hospital, McGill University, Montreal, Quebec, Canada

» Calcaneonavicular and talocalcaneal coalitions account for 90% of all tarsal coalitions in the pediatric population.

» Computed tomographic (CT) or magnetic resonance imaging (MRI) scans identify tarsal coalitions that are unrecognized on radiographs and provide more information regarding the size, content, and location of coalitions. They are a mandatory component of the evaluation.

» Nonoperative measures represent the first line of treatment and may consist of activity modification coupled with nonsteroidal anti-inflammatory medications, the use of shoe inserts or orthotics to elevate the medial arch and to preserve hindfoot alignment, and immobilization in a below-the-knee walking cast to reduce joint stresses and to permit microfractures to heal.

» Operative treatment should be considered after nonoperative measures have been exhausted. The selection of the operative procedure should depend on the location of the pain, whether or not the tarsal coalition can be resected, the presence of marked hindfoot alignment, and the presence of arthritis in the Chopart joint.

» Patients with talocalcaneal coalitions that are >50% of the size of the posterior talocalcaneal facet and have excessive hindfoot deformity should be counseled, before undergoing coalition resection, about the higher chance of having a poor outcome and requiring a secondary procedure.

Caso clínico

11 años, varón

Traído por la madre a CCEE Medicentro por cojera pie derecho al realizar deporte



Rx iniciales

D

En carga



Rx iniciales

En carga

D



Rx iniciales





TAC



CIRUGIA TIEMPO 1

LIBERACION COALICCIÓN AC VIA MEDIAL



CIRUGIA TIEMPO 2

OSTEOTOMIA MEDIALIZACION DE CALCANEO



PODOSCOPIO IMAGEN FINAL



PODOSCOPIO COMPARATIVA PRE - POST.OP

