Feline Hip Fracture—Kirschner Wires Work

Femoral capital physeal fractures are common in cats. These fractures can result in persistent lameness caused by malunion or nonunion of the femoral head when treated by medical management and rest alone. Ostectomy of the femoral head and neck is a common procedure that can produce a functional result, but reports have suggested that reconstruction of the fracture site is optimal for maintenance of the hip joint and return to normal anatomical configuration and function. In this retrospective study of 13 cats receiving reduction and surgical stabilization of these fractures, factors affecting outcome, such as nonunion, migration of Kirschner wires used in fixation, persistent lameness, avascular necrosis of the femoral head and neck, and infection of the surgery site, were evaluated. Data were collected on age, sex, breed, and weight; concurrent injuries (3 of the cats had fractures to both capitals); amount of fracture reduction; degenerative joint disease; number and size of Kirschner wires used and whether they were removed after healing; and severity of lameness at 1, 2, 4, 6, and 8 weeks after surgery. All data were evaluated via a computer program, and 4 people examined radiographs to evaluate reduction and fixation.

In all cats, clinical lameness significantly improved from week 1 through week 4 after surgery and success did not require optimal fixation of the fracture. These findings suggest that surgical repair and stabilization of femoral capital physeal fractures is the treatment of choice with a good prognosis and a short recovery time.

COMMENTARY: Femoral capital physeal fracture in cats is a common traumatic injury seen by small animal practitioners. This retrospective study demonstrates the advantages of surgical repair of this type fracture by placement of Kirschner wires compared with other treatments, such as femoral head ostectomy or cage rest with medical management. The good outcome seen even with less-than-optimal wire placement and fracture fixation would indicate that most cases have a good prognosis for return to function.—Bess P. Brosey, MZS, DVM, Diplomate ABVP & ACVIM