CLINICAL IMAGE

Bilateral fibular hemimelia associated with hip dislocation and femoral head necrosis

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Introduction

We report a case of 8-year-old girl presenting fibular hemimelia and limping since birth. Clinical examination detected the fibular hemimelia and the hip dislocation, and X-rays confirmed fibular hemimelia associated with femoral head necrosis. The patient was treated with femoral head replacement and physiotherapy with a good outcome.

Case Description

We report the case of an 8-year-old girl issued from a consanguineous marriage; the parents complained of a foot deformity observed since the birth and limping.

Physical examination revealed antalgic limping. The left foot was smaller than the right with the absence of two external toes (Fig. 1) and equinovalgus ankles. We found also a valgus deformity of the knee and anteroposterior laxity, straight tibias with painful and limited movements of the hip especially internal rotation and abduction, the limbs were equal in length.

Conventional radiographs show bilateral agenesis of the fibula, the absence of two external digital rays of the left foot (Fig. 2), and dislocation of the right hip complicated

Key Clinical Message

We describe a case of association of congenital bone abnormalities. It will allow clinicians to look systematically for other skeletal malformations and teach them how to evaluate these cases for the first time. This early screening will enable appropriate treatment to avoid complications and to preserve functional prognosis.

Keywords

Femoral head necrosis, femoral head replacement, fibular hemimelia, hip dislocation

with femoral head avascular necrosis (Fig. 3). The child was treated with surgical replacement of the femoral head by prosthesis associated with physiotherapy; the follow-up was marked by the acquisition of walking.

It is almost always present with other bone abnormalities of the lower limb, suspected in case of gait disorder,



Figure 1. Picture showing the left foot deformity with oligosyndactyly.

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Figure 2. Picture showing the bilateral agenesis of the fibula (type II according to Achterman and Kalamchi classification), the absence of two external digital rays of the left foot, and metatarsal agenesis.

and requires a complete clinical and radiological evaluation of the lower limbs with full-length radiography; the upper limbs can be explored when a particular syndrome is evoked [1], and a hip dislocation can be associated [2].

Acknowledgments

Not applicable.

Conflict of Interest

The authors declare that they have no competing interests.



Figure 3. Picture showing a dislocation of the right hip complicated with femoral head avascular necrosis.

Authorship

SS and AA: analyzed and interpreted the patient data regarding the disease and were major contributors in writing the manuscript. HB: operated the patient. All authors read and approved the final manuscript.

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