

Use a ball-ended anterior cruciate ligament reamer to protect patella tendon during minimal access tibial nailing

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Minimal access tibial nailing is popular. After entry point identification and guidewire placement, a cannulated entry reamer is used to 'open' the medullary canal. Rather than using the manufacturer's guidewire and bulky 12mm reamer, we recommend using the anterior cruciate ligament tibial guidewire and the 10mm ball-ended reamer (Fig 1).

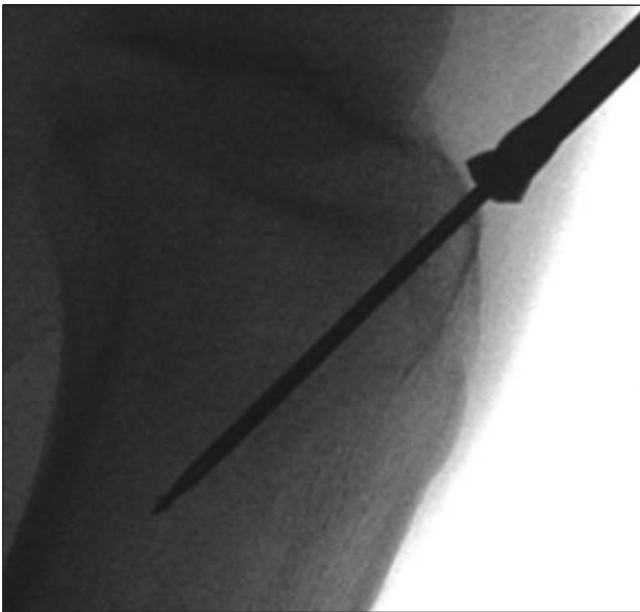


Figure 1 Ball-ended 10mm anterior cruciate ligament reamer

This reamer's short cutting length minimises damage during reaming of proximal tibial metaphysis as the reamer can be pushed gently through the incised tendon before it is activated. The 10mm hole in metaphyseal bone allows easy passage of subsequent canal reamers and the tibial nail.

Akin osteotomy: good staple positioning

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Akin osteotomy is a common component of hallux valgus surgery. Holding the osteotomy in good position with a well placed staple can prove difficult. To aid this, a marker pen is used to apply ink to the tip

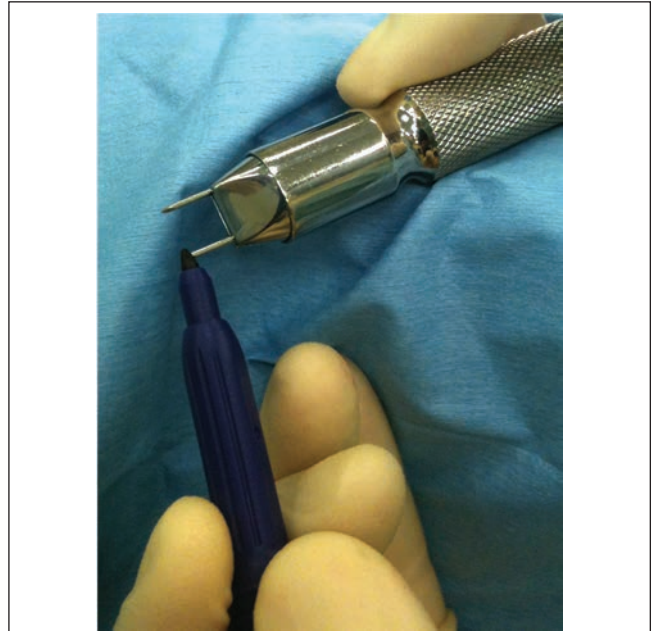


Figure 1 A marker pen is used to apply ink to the staple tip.



Figure 2 The proximal hole has been marked and drilled ready for staple insertion.

of the proximal limb of the staple (Fig 1). A hole is drilled in the distal bone and the non-inked staple limb is inserted while the osteotomy is held in the desired position. This causes transfer of ink from staple to bone surface (Fig 2), thereby marking the appropriate site to drill and insert the proximal staple limb.