

Images in clinical medicine

Osteomalacia: a forgotten diagnosis of multiple bone fractures

Karim Khezami, Mohamed Amine Bennou

Corresponding author: Karim Khezami, Faculty of Medicine of Tunis, University Tunis El Manar, Department of Orthopedic Surgery, Habib Bougatfa Hospital, Bizerte, Tunisia. khezamikarim@gmail.com

Received: 21 Mar 2021 - **Accepted:** 01 Apr 2021 - **Published:** 15 Apr 2021

Keywords: Osteomalacia, femoral neck, fracture

Copyright: Karim Khezami et al. Pan African Medical Journal (ISSN: 1937-8688). This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Cite this article: Karim Khezami et al. Osteomalacia: a forgotten diagnosis of multiple bone fractures. Pan African Medical Journal. 2021;38(369). 10.11604/pamj.2021.38.369.28987

Available online at: <https://www.panafrican-med-journal.com//content/article/38/369/full>

Osteomalacia: a forgotten diagnosis of multiple bone fractures

Karim Khezami^{1,&}, Mohamed Amine Bennour¹

¹Faculty of Medicine of Tunis, University Tunis El Manar, Department of Orthopedic Surgery, Habib Bougatfa Hospital, Bizerte, Tunisia

&Corresponding author

Karim Khezami, Faculty of Medicine of Tunis, University Tunis El Manar, Department of Orthopedic Surgery, Habib Bougatfa Hospital, Bizerte, Tunisia

Image in medicine

We present a case of a 53-year-old female patient with chronic anemia, with no other significant medical history and on no regular medications. The patient was brought to the accident and emergency department following found on the floor of her home after having tripped over a mat and henceforth being unable to mobilize and complaining of pain in her bilateral hip and her right leg. X-rays confirmed bilateral neck of femur fractures and fractures of the distal end of the tibia and fibula. The bones were extremely gracile and osteoporotic. Investigations demonstrated raised parathyroid hormone levels (199 pg/mL, normal

range (nr) 15-72), with low vitamin D (7 ng/mL, nr 50-100) and adjusted calcium (1.87 mmol/L, nr 2.2-2.6) levels. We have eliminated the diagnosis of

myeloma. Calcium and vitamin D were replaced prior to the insertion of bilateral femoral nails.

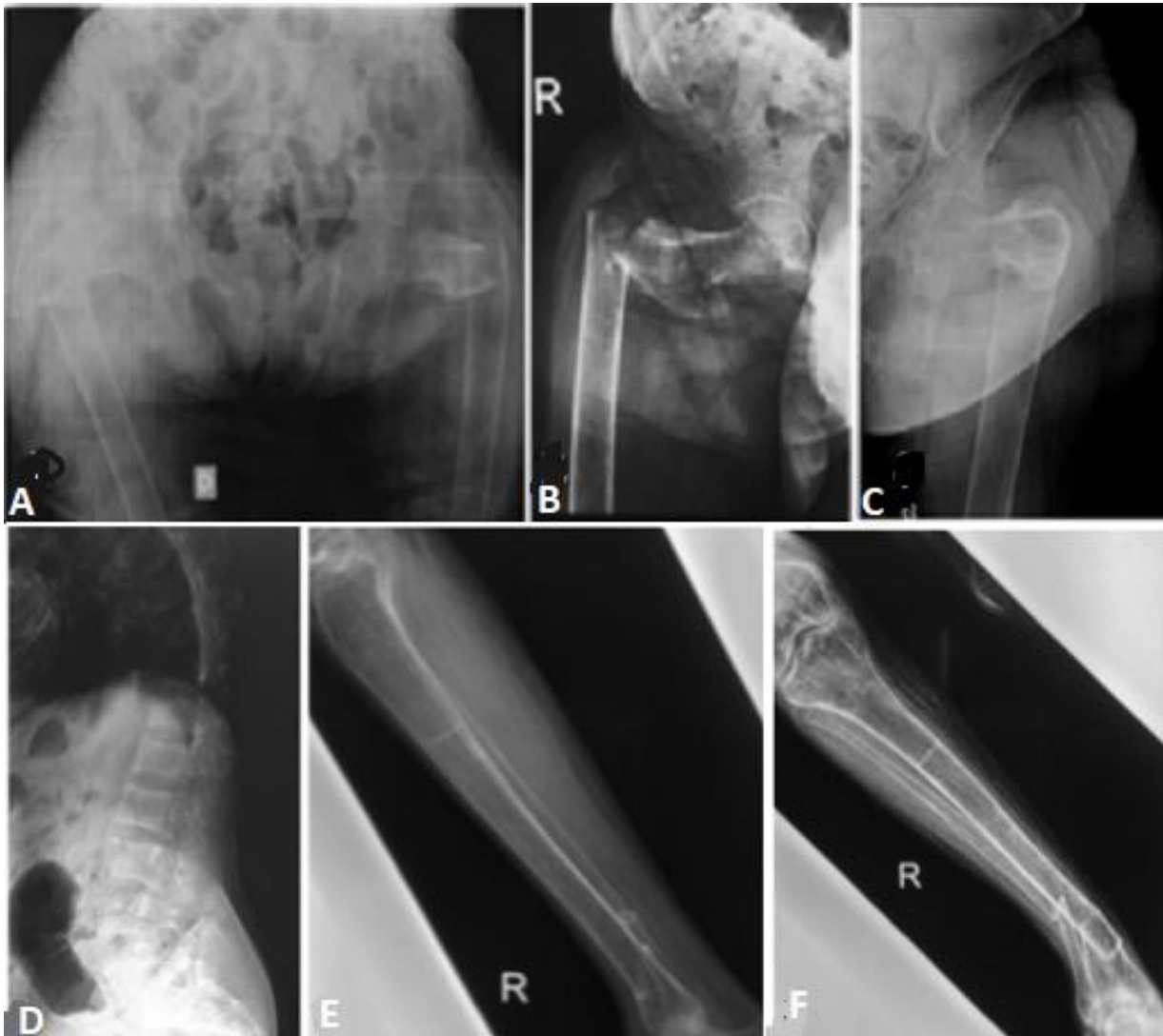


Figure 1: A) bilateral proximal femoral fractures associated with low energy; B) right subtrochanteric femoral fracture; C) left subtrochanteric femoral fracture; D) diffuse demineralization of the spine: osteoporotic-like pattern; (E,F) supramalleolar fracture of tibia and fibula