

Fibular hemimelia

Fibular hemimelia

In fibular hemimelia there is a congenital failure of formation of the lateral ‘column’ of the lower leg (Figure 44.26 and Table 44.9).

TABLE 44.9 Classical radiographic features of fibular hemimelia.

Foot and ankle Absent lateral rays; tarsal coalition; ball

and-socket ankle joint Lower leg Absent or deficient fibula; short, bowed tibia Knee Absent tibial spine (no cruciate ligament); deficient lateral femoral condyle Femur Relative hypoplasia Limb length and Short; external rotation with/without alignment valgus

Management is tailored to the severity of the deficiency . Treatment options range from a shoe raise, through multiple episodes of limb equalisation surgery to amputation for the worst cases. An early prediction of the leg length discrepancy at maturity allows a realistic treatment plan to be devised for the patient, which should include consideration of a contra- lateral epiphysiodesis.

Figure 44.26 Anteroposterior (a) and lateral (b) radiographs of two lower limbs showing some of the features of a fibular hemimelia: absent fibular ray in the foot, absent fibula and deformed tibia.

Fibular hemimelia

In fibular hemimelia there is a congenital failure of formation of the lateral ‘column’ of the lower leg (Figure 44.26 and Table 44.9).

TABLE 44.9 Classical radiographic features of fibular hemimelia.

Foot and ankle Absent lateral rays; tarsal coalition; ball

and-socket ankle joint Lower leg Absent or de /f_i cient /f_i bula; short, bowed tibia Knee Absent tibial spine (no cruciate ligament); de /f_i cient lateral femoral condyle Femur Relative hypoplasia Limb length and Short; external rotation with/without alignment valgus

Management is tailored to the severity of the deficiency . Treatment options range from a shoe raise, through multiple episodes of limb equalisation surgery to amputation for the worst cases. An early prediction of the leg length discrepancy at maturity allows a realistic treatment plan to be devised for the patient, which should include consideration of a contra- lateral epiphysiodesis.

Figure 44.26 Anteroposterior (a) and lateral (b) radiographs of two lower limbs showing some of the features of a /f_i bular hemimelia: absent /f_i fth ray in the foot, absent /f_i bula and deformed tibia.

Fibular hemimelia

In fibular hemimelia there is a congenital failure of formation of the lateral ‘column’ of the lower leg (Figure 44.26 and Table 44.9).

TABLE 44.9 Classical radiographic features of /f_i bular hemimelia.

Foot and ankle Absent lateral rays; tarsal coalition; ball

and-socket ankle joint Lower leg Absent or de /f_i cient /f_i bula; short, bowed tibia Knee Absent tibial spine (no cruciate ligament); de /f_i cient lateral femoral condyle Femur Relative hypoplasia Limb length and Short; external rotation with/without alignment valgus

Management is tailored to the severity of the deficiency . Treatment options range from a shoe raise, through multiple episodes of limb equalisation surgery to amputation for the worst cases. An early prediction of the leg length discrepancy at maturity allows a realistic treatment plan to be devised for the patient, which should include consideration of a contra- lateral epiphysiodesis.

Figure 44.26 Anteroposterior (a) and lateral (b) radiographs of two lower limbs showing some of the features of a /f_i bular hemimelia: absent /f_i fth ray in the foot, absent /f_i bula and deformed tibia.

Revision #1

Created 2025-12-31 15:16:45 UTC by Omar Ayman

Updated 2025-12-31 15:16:45 UTC by Omar Ayman