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Wave Proximal Posterior Tibia Plate

Length: 96 – 264 mm (24 mm increments)
Holes: 4 – 18 (2 Hole increments)
Direction: Left, Right

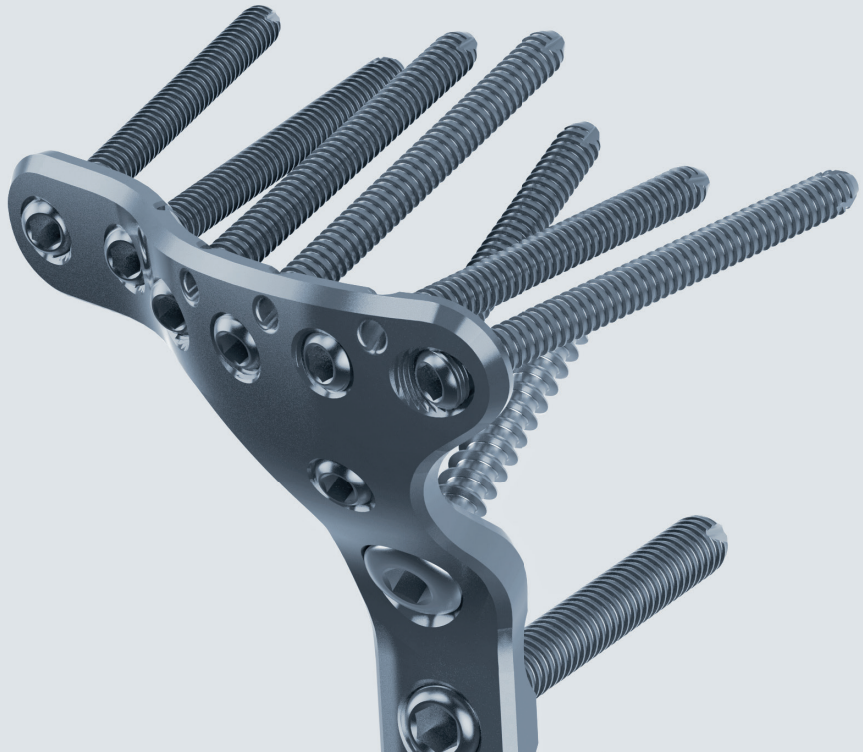
Proximal Tibia Plates

Proximal Posterior Tibial Locking Plate II
Length: 77 – 125 mm (24 mm increments)
Holes: 3 – 7 (2 Hole increments)
Direction: Left, Right

Proximal Lateral Tibial Locking Plate II
Length: 80 – 180 mm (50 mm increments)
229 mm
Holes: 5 – 17 (2 Hole increments)
Direction: Left, Right

Proximal Medial Tibial Locking Plate II
Length: 60 – 108 mm (24 mm increments)
Holes: 4 – 8 (2 Hole increments)
Direction: Left, Right

WAVE
PROXIMAL POSTERIOR TIBIA PLATE



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WAVE
PROXIMAL POSTERIOR TIBIA PLATE

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Background

- Intra-articular tibial plateau fractures with involvement of the posterior tibia plateau are increasingly recognized.
- Posterior tibial plateau fractures are associated with poor functional outcome.
- Growing awareness to address the posterior tibial plateau fractures.

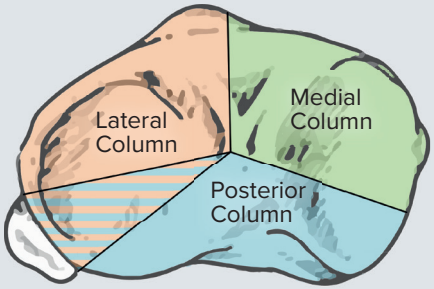
Classification

- Commonly used 2D radiograph classifications are not sufficient to depict posterior tibial plateau fractures.
- The three-column classification (TCC) is reliable for the preoperative planning and treatment of (posterior) tibial plateau fractures.

Luo C-F et al (2010) Three-column fixation for complex tibial plateau fractures. J Orthop Trauma 24(11):683-692. http://doi.org/10.1097/BOT.0b013e3181d436f3

- According to the revised 3-column classification, column fractures that extent into the posterolateral corner allow for both a lateral and posterior approach.

Hoekstra H et al (2016) A revised 3-column classification approach for the surgical planning of extended lateral tibial plateau fractures. European Journal of Trauma and Emergency Surgery, pp. 1–7. http://doi.org/10.1007/s00068-016-0696-z

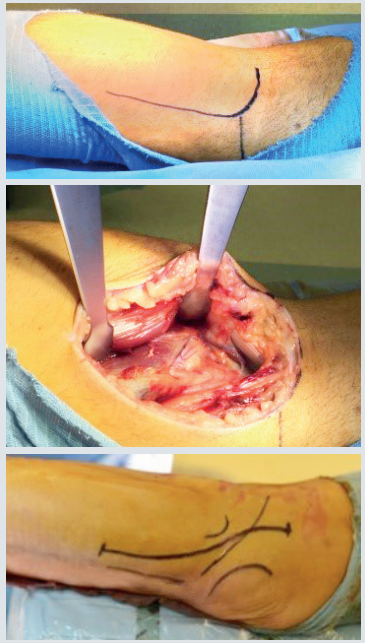


Revised three-column Classification

Approach

- Reversed L-shaped approach for posterior column fractures.
- Possibly in combination with an anterolateral approach in floating position.

Hoekstra H et al (2015). A combined posterior reversed L-shaped and anterolateral approach for two column tibial plateau fractures in Caucasians: A technical note. Injury, 46(12), 2516–2519. http://doi.org/10.1016/j.injury.2015.10.014



Source: University Hospitals Leuven, 2017

- Need for a buttress plate for optimal proximal posterior tibia plateau reduction and fixation according to the reversed L-shaped approach.
- Sufficient posterior buttress of both posteromedial and posterolateral tibial plateau fractures.
- Small fragment joint supporting locking screws combined with large fragment screws in the tibial shaft for adequate purchase of lag screws and controlled load transfer into the tibia shaft.