



DEFORMATIONS DES ORTEILS TECHNIQUE GESTES OSSEUX

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Gestes osseux

- Ostéotomie de la 1[°] phalange (PP)
- Ostéotomie de la 2[°] phalange (PM)
- Condylectomie

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- Ostéotomie de la 2° phalange (PM)
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Ostéotomie PP

BICORTICALE : raccourcissement

- orteil trop long dans P1
- déformation ancienne et rigide



MONOCORTICALE : correction angulaire

- déviations latérale ou médiale
- flexion plantaire



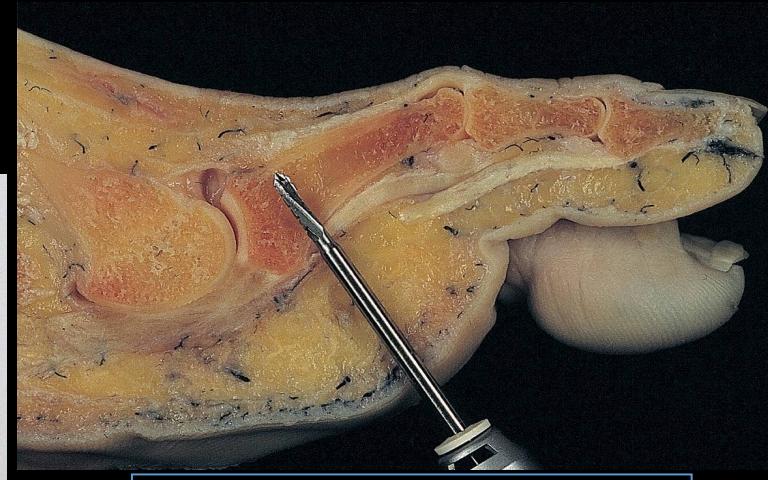
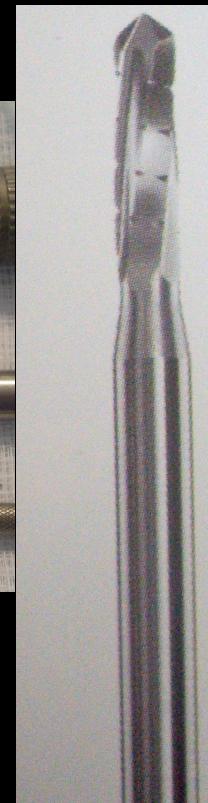
TECHNIQUE (Ostéotomie PP)

Voie d'abord plantaire / latérale / dorsale
(proximale au pli digital)

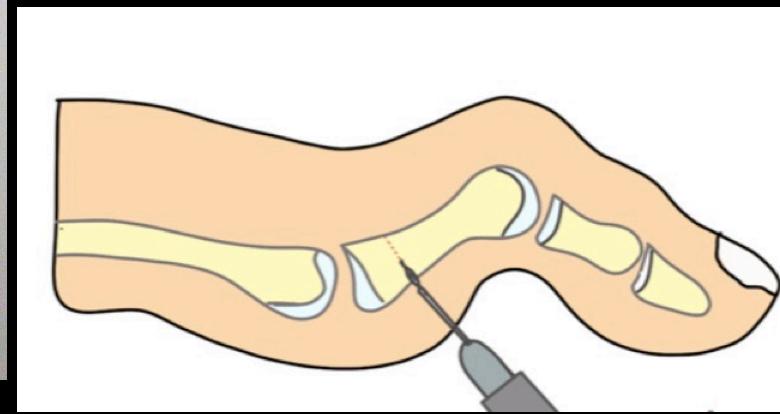
Latérale / fléchisseurs



De B Piclet



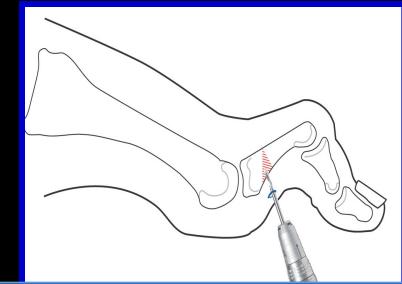
De M.de Prado et P.Golano



Méタphyse = zone idéale pour
consolidation osseuse optimale

TECHNIQUE (Ostéotomie PP)

Abord plantaire



M.de Prado and P.Golano

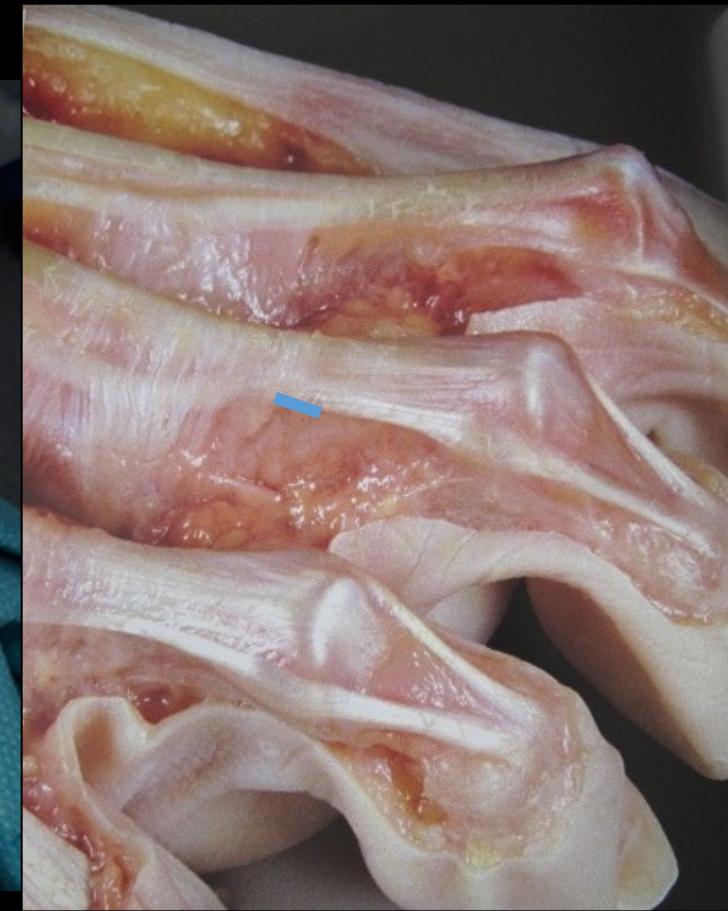
TECHNIQUE (Ostéotomie PP)

Abord latéral



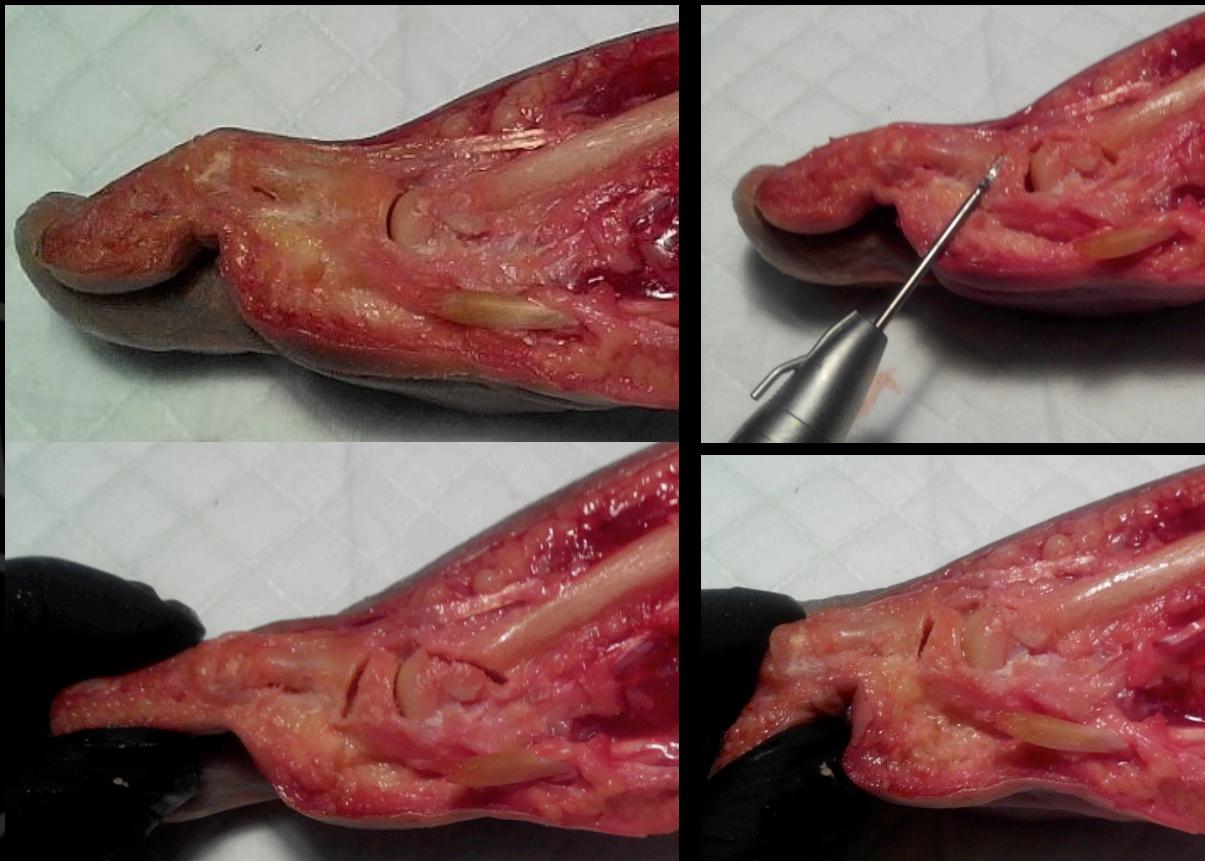
TECHNIQUE (Ostéotomie PP)

Abord dorso-latéral



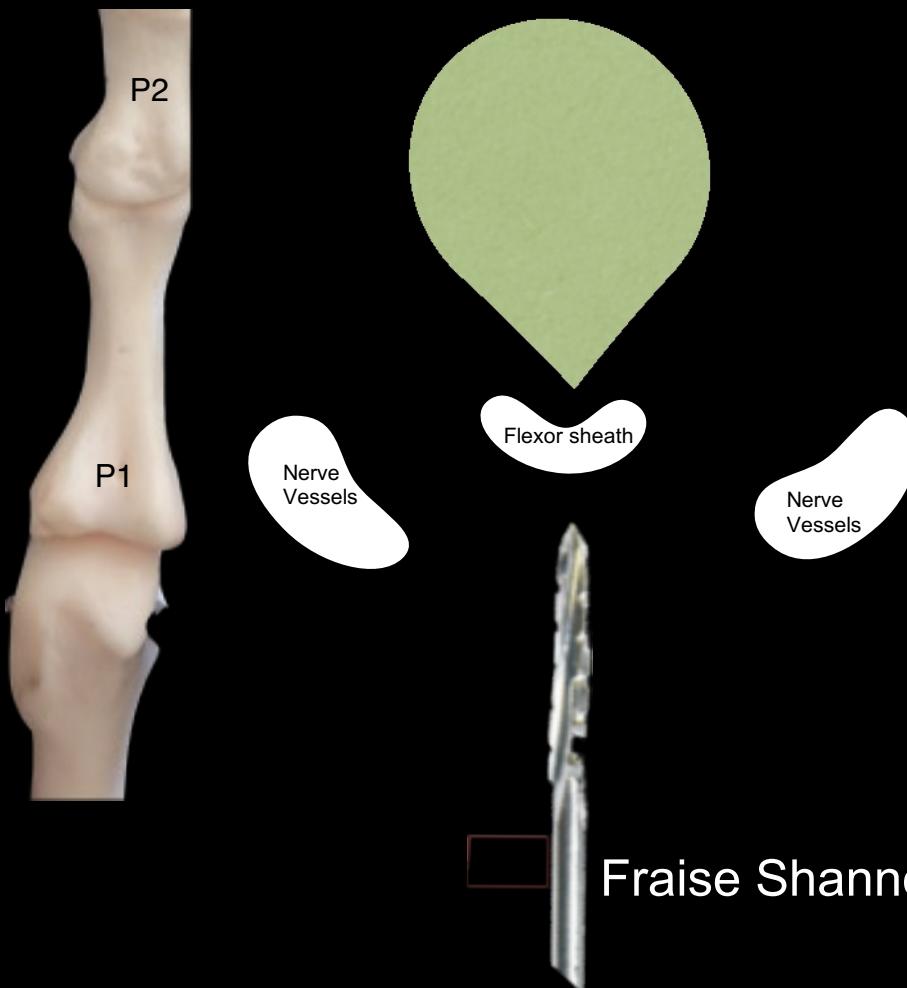
TECHNIQUE (Ostéotomie PP)

Osteotomie momocorticale



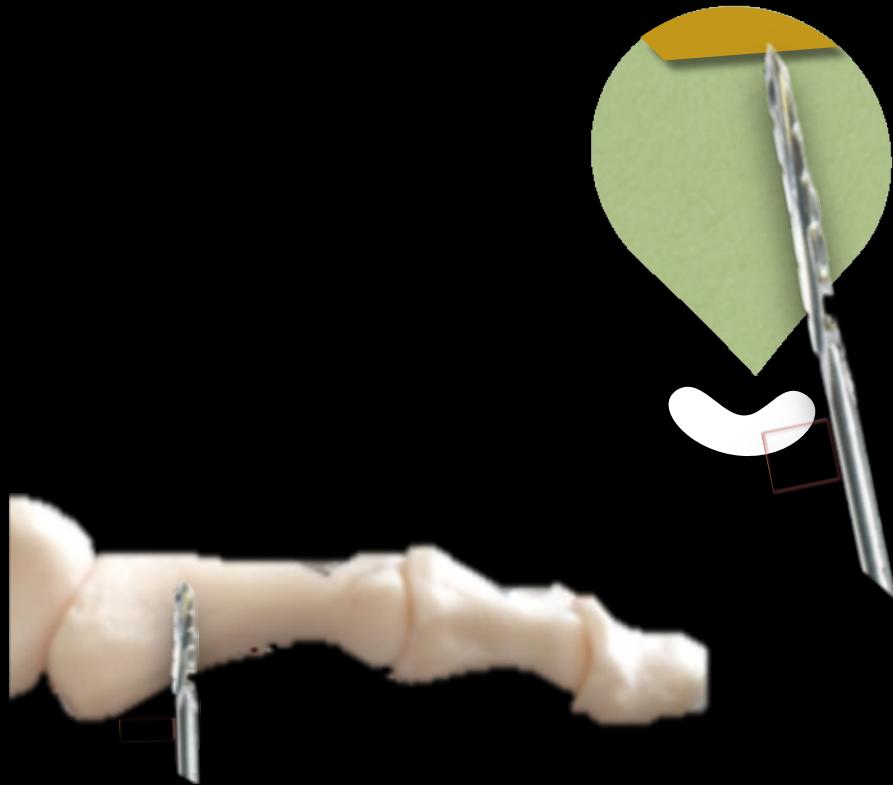
PROXIMAL PHALANX OSTEOTOMY - Surgical approach

Osteotomie momocorticale



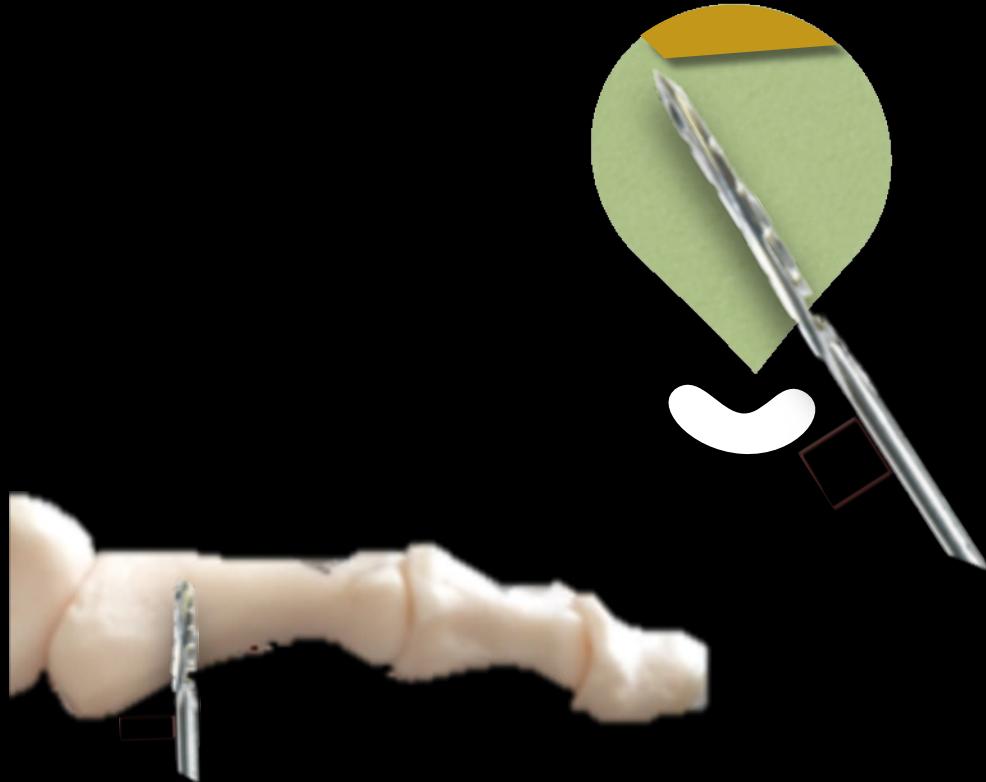
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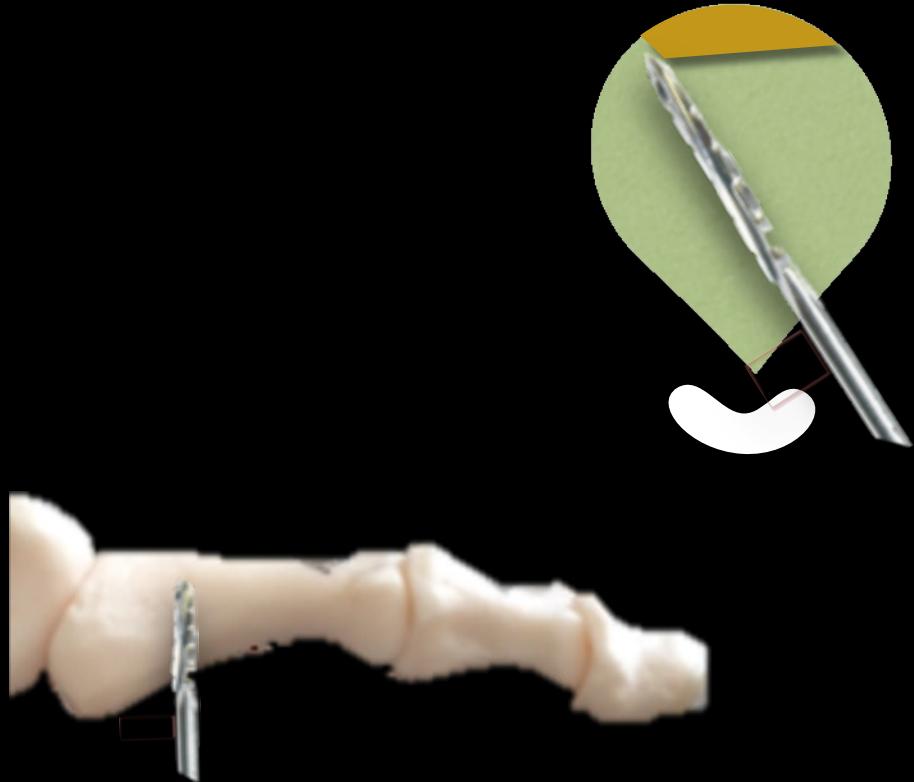
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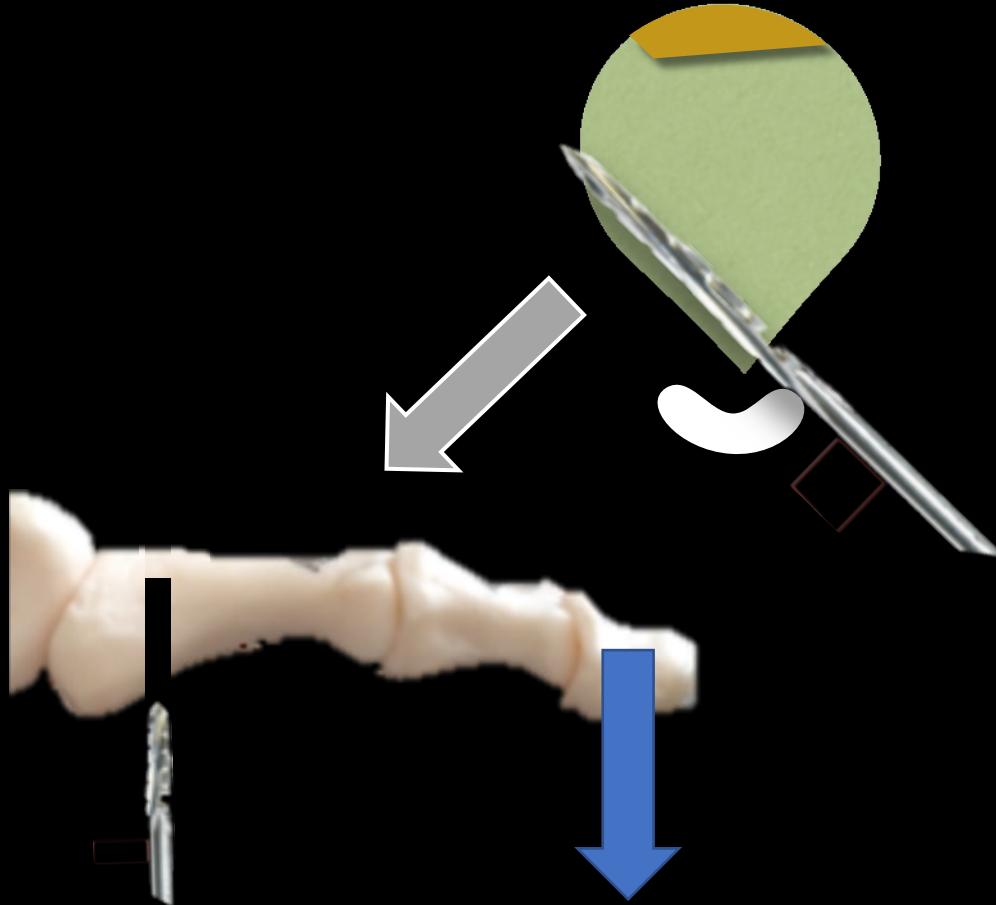
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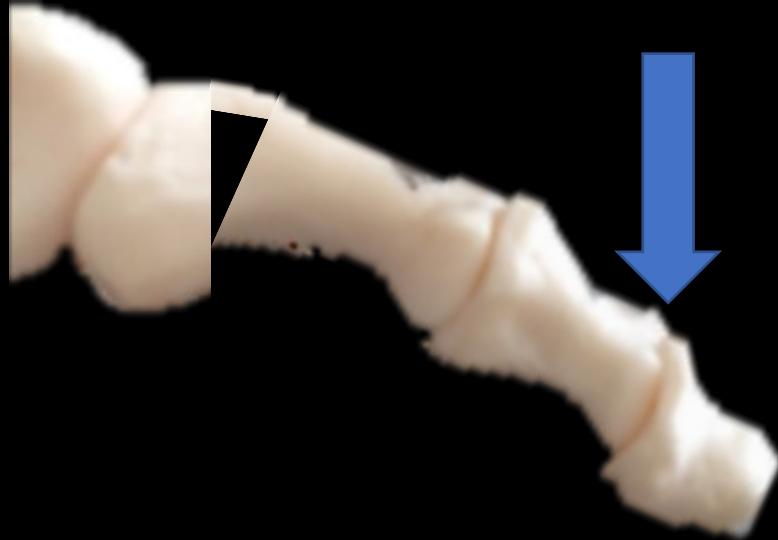


*Can correct varus / valgus toe deformity simply by altering the axis / apex of the osteotomy

PROXIMAL PHALANX OSTEOTOMY - Surgical approach

Osteotomie momocorticale

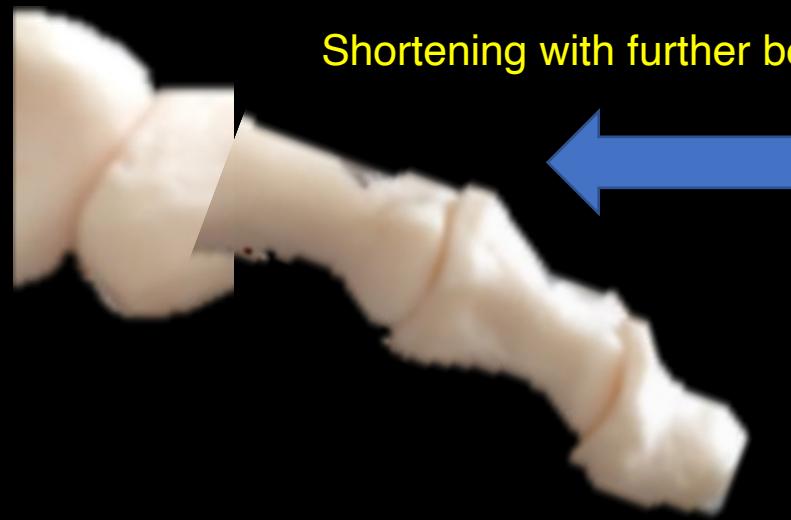
Increase correction by repeating the cut with the osteotomy closed



PROXIMAL PHALANX OSTEOTOMY - Surgical approach



Shortening with further bone removal

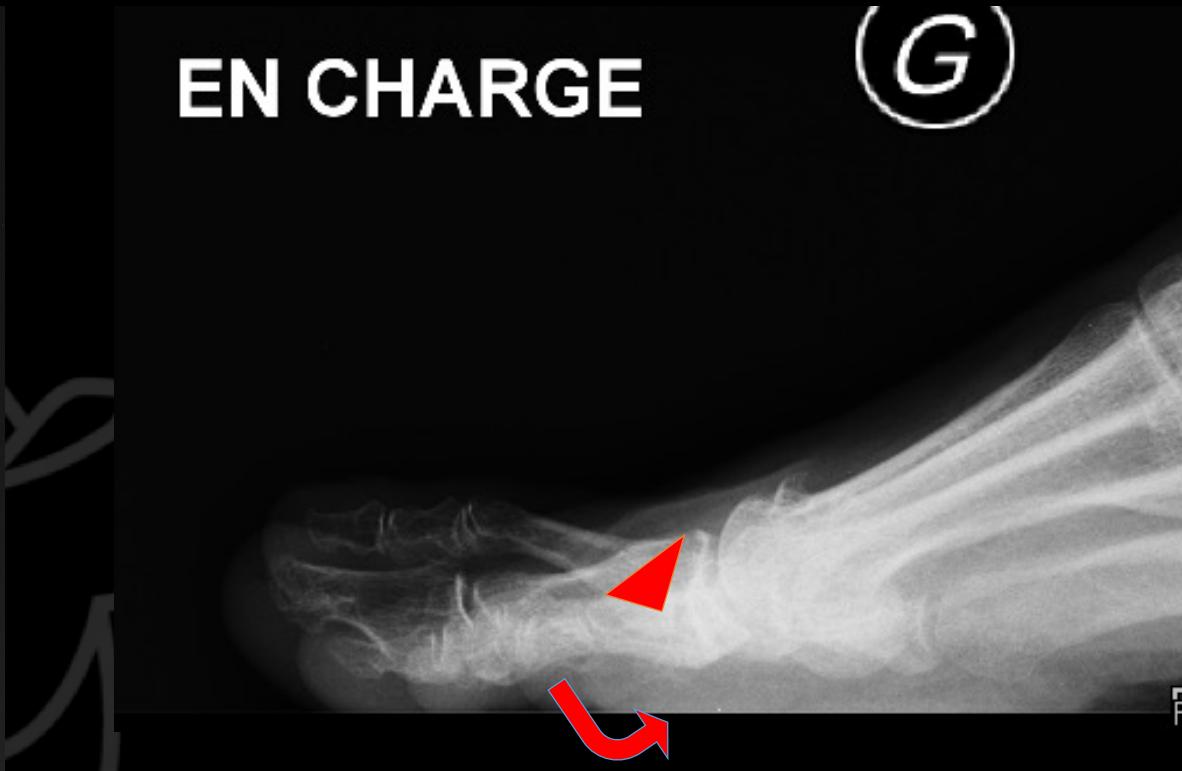


PROXIMAL PHALANX OSTEOTOMY - Surgical approach



EN CHARGE

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PROXIMAL PHALANX OSTEOTOMY - Surgical approach



PROXIMAL PHALANX OSTEOTOMY - Surgical approach



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PROXIMAL PHALANX OSTEOTOMY - Surgical approach



Gestes osseux

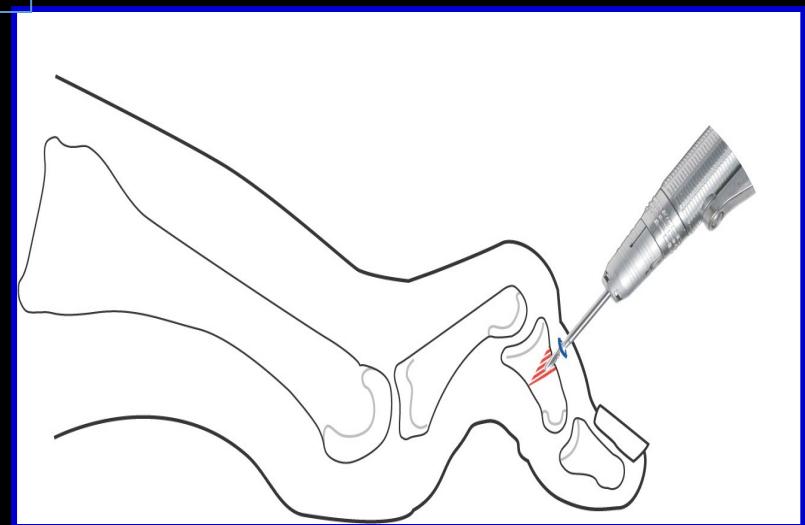
- Ostéotomie de la 1° phalange
- Ostéotomie de la 2° phalange
- Condylectomie

TECHNIQUE (Ostéotomie PM): technique

- Voie latérale ou médiale (sous le nerf) selon:
 - pied opéré
 - main dominante du chirurgien
 - du geste désiré
- médio-diaphysaire pour éviter 1 effraction articulaire



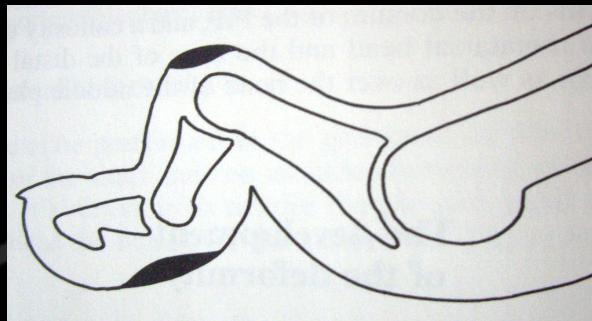
De M.de Prado et P.Golano



TECHNIQUE (Ostéotomie PM)

MONOCORTICALE

dorsiflexion



Valgisation/varisation



TECHNIQUE (Ostéotomie PM)

BICORTICALE

-Raccourcissement
(PM trop longue)

- Geste
complémentaire
(correction
griffe
insuffisante)



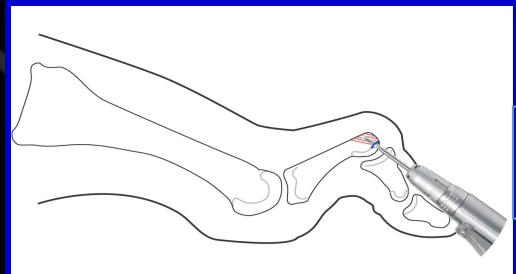
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CONDYLECTOMIE : technique

- Voie: latérale or médiale distale dorsale PP
(au dessus du nerf digital dorsal)



- parfois+ facile / distal dorsal PM,
orteil en flexion



De M.de Prado et P.Golano

Fraisage dorsal tête PP +/- base PM

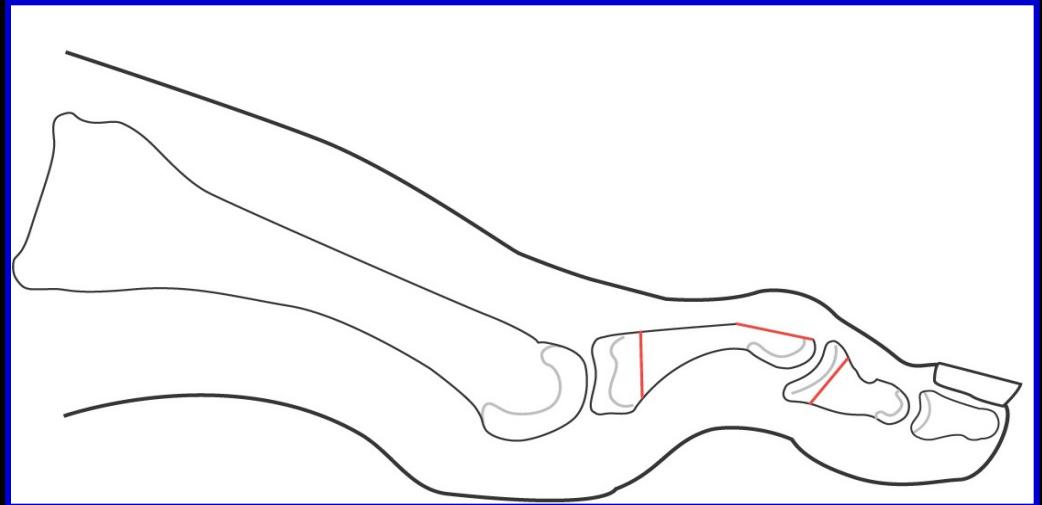
Fragments osseux mieux éliminés sans garrot
Risque de résidus osseux (fluoroscan++)



CONDYLECTOMIE : technique

Procédure complète
longue et rarement utilisée

De M.de Prado et P.Golano



CONDYLOPLASTIE : geste ultime en cas de flessum IPP résiduel (rarement)
Parfois, transformé en arthroplastie en cas d'orteil très rigide ou iatrogénique

And if you want to learn more...

Welcome in Brazil



The image features the MIFAS by Gracimap logo in the top left corner, which consists of a stylized globe icon above the text "MIFAS" and "by Gracimap". To the right is a scenic view of the Rio de Janeiro skyline, including Sugarloaf Mountain and the cable car system. Below the image is a white banner with the text "VENUE Windsor Barra Hotel" and "OFFICIAL LANGUAGE English" with a British flag icon. The main text on the banner reads "6th International Congress of Foot & Ankle Minimally Invasive Surgery" followed by the dates "5-7 October | Rio de Janeiro 2023 | Brazil".





Thanks

Merci

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