

These Hips Don't Lie

Nandan R. Hichkad, PA-C, MMSc

An 80-year-old man is transferred to your facility for evaluation of a lumbar compression fracture he sustained from a motor vehicle collision. The patient was a restrained driver in a vehicle that was broadsided at an unknown speed. His airbags deployed. In addition to mild back discomfort, he complains of severe right hip pain.

His medical history is significant for prostate cancer and coronary artery disease. Surgical history includes remote cardiac bypass surgery and recent revascularization with stents.

On examination, you note an elderly male who is awake and alert. His vital signs are stable. He is able to move all extremities, but movement of his hip is limited secondary to moderate pain. No leg shortening is noted. There is some tenderness within his lumbar spine. Strength appears to be intact.

A portable pelvis radiograph is obtained (shown). What is your impression?



Nandan R. Hichkad, PA-C, MMSc, practices at the Georgia Neurosurgical Institute in Macon and is a clinical instructor at the Mercer University School of Medicine, Macon.

ANSWER

The radiograph shows no evidence of an acute fracture. Incidental findings include excreted contrast within the bladder and radiopaque markers from prostatic seed implants.

Fairly extensive sclerosis is noted within both femoral heads, which is suggestive of osteonecrosis (also known as *avascular necrosis*). Orthopedic consult was requested for further workup of this specific problem. **CR**

