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(Author), Martin Allgöwer (Author, Co-editor), Robert Schneider (Author), 4.8 out of 5 stars 6 ratings

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This group was set up in the same year under the name Arbeitsgemeinschaft für Osteosynthesefragen (AO), later on to be known in English-speaking countries as the Association for the Study of Internal Fixation (ASIF).

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Basic Principles and Techniques of Internal Fixation of ...

AO Surgery Reference is a resource for the management of fractures, based on current clinical principles, practices and available evidence. Orthopedic trauma (incl pediatrics) CMF. Spine. Veterinary. AO Innovation Translation Center. Calls for proposals: Apply now for AO innovation resources .

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Increasing demands for a description of the AO technique of internal fixation has stimulated us to publish this manual. In it we shall describe in a comprehensive but somewhat apodictic manner the principles and techniques of the AO methods of fracture treatment and reconstructive surgery, which in our hands, have stood the test of time.

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• Adjunct to internal fixation and ligamentous repair ... Fixation Compared With Cross-pinning of the Elbow for Acute and Subacute Instability. CORR, 472: 2044- 2048,

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2014. DAMAGE CONTROL SURGERY Pape et al.
Annals of Surgery 2007

Principles of External Fixation

Next comes internal rotation. The reduction must be checked in both the AP and lateral with an image intensifier. In case the closed reduction should fail, open reduction will be necessary. One always starts with an attempt at closed reduction. If a satisfactory reduction is achieved, proceed with fixation as described below.

ORIF - AO Foundation Surgery Reference

Abstract. The use of metal wire, screws, plates, pins, and rods for skeletal internal fixation in orthopedic surgery has been evolving for several decades with the progressive development of improved techniques, materials, and instruments. This publication presents the techniques of the AO-Group (the Swiss Association for the Study of Internal Fixation).

Manual of Internal Fixation: Techniques Recommended by the ...

This book is intended to aid course participants in their lessons and practical exercises and also to guide the clinical practitioner in the application of AO/ ASIF principles. Author(s): Bernd

Spießl Description: The rigid internal fixation of mandibular fractures has become a widely accepted practice among European

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surgeons.

Internal Fixation of the Mandible: A Manual of AO/ASIF ...

The AO clinical divisions and clinical unit continually redefine the state-of-the-art in their fields, maintaining activities in research, development, clinical investigation and education. Since the AO was founded, more than 660,000 surgeons and operating room personnel have participated in AO courses to date in over 124 countries.

AO Foundation: Transforming Surgery—Changing Lives

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The Manual of INTERNAL FIXATION is well known internationally as a standard work for every specialist dealing with osteosynthesis. Due to the many changes that have taken place, an international faculty of orthopaedic surgeons and traumatologists completely revised and expanded the manual.

Manual of Internal Fixation: Techniques

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management of animals by sundararajan thilagar published 2006 manual of internal fixation techniques recommended by the ao group published manual of internal fixation in small animals 2nd ed 1998 softcover reprint of the original 2nd ed 1998 edition by wade o brinker editor 50 out of 5 stars 3 ratings isbn 13 978 3642643385 isbn

Manual Of Internal Fixation In Small Animals [EBOOK]

AO Principles of Fracture Management is an essential resource for orthopedic trauma surgeons and residents in these specialties. The third edition of the book has been fully updated and extended to describe the latest techniques and covers the complete content of the AO Principles Course of today.

The Manual of INTERNAL FIXATION is well known internationally as a standard work for every specialist dealing with osteosynthesis. Due to the many changes that have taken place, an international faculty of orthopaedic surgeons and traumatologists completely revised and expanded the manual. In its third edition the manual reflects the state of the art and is the necessary reference for every AO specialist.

The German edition of our book entitled

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"Operative Frakturen beandlung" by M. E. MÜLLER, M. ALLGÖWER and H. WILLENEGGER (Springer, Berlin . Göttingen . Heidelberg, 1963) has been out of print now for more than three years. We are planning a new edition which will deal with the collective experience of 14,000 new cases, all treated by internal fixation, and will include the newest developments in the field of internal fixa tion. However, it will be some time before this new edition can be published. Increasing demands for a description of the AO technique of internal fixation has stimulated us to publish this manual. In it we shall describe in a comprehensive but somewhat apodictic mann er the principles and techniques of the AO methods of fracture treatment and reconstructive surgery, which in our hands, have stood the test of time. The book is written in a somewhat abbreviated style. It cor responds in subject matter to the teaching given at the AO courses in Davos, but deals with each subject more thoroughly. We have dispensed with pictures of the instruments, as these may be found in the Synthes Catalogue *. This manual should be regarded as the product of collective experiencc, containing new thoughts and new discoveries from basic research. In considering the risks of mistakes and dangers, we can only reiterate what we have already stated in "Technique of Internal Fixation of Fractures": "Open treatment of fractures is a valuable but difficult method

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which involves much responsibility.

The first part of this manual deals with the experimental and scientific basis and the principles of the AOJASIF method of stable internal fixation. It deals with the function and main use of the different AO implants, the use of the different AO instruments, and with the essentials of the operative technique and of postoperative care. It also discusses the handling of the most important postoperative complications. The second part deals at length with the AO recommendations for the operative treatment of the most common closed fractures in the adult. This has been organized in anatomical sequence. The discussion of the closed fractures is followed by a discussion of open fractures in the adult, then by fractures in children and finally by pathological fractures. The third part presents, in a condensed fashion, the application of stable internal fixation to reconstructive bone surgery.

1 GENERAL CONSIDERATIONS

1 Aims and Fundamental Principles of the AO Method

The Chief Aim of Fracture Treatment is the Full Recovery of the Injured Limb

In every fracture there is a combination of damage to both the soft tissues and to bone. Immediately after the fracture and during the phase of repair, we see certain local circulatory disturbances, certain manifestations of local inflammation, as well as pain and reflex splinting. These three factors, that is, circulatory

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disturbances, inflammation and pain, when combined with the defuncting of bone, joints and muscle, result in the so-called joint disease.

The rigid internal fixation of mandibular fractures has become a widely accepted practice among European surgeons. The caution or even outright rejection voiced at a congress of the German Society of Maxillofacial Sur 1970s is no longer prevalent. Through a process of decisions held in the late critical review and implementation, rigid internal fixation has become an established treatment modality at numerous centers, especially in Switzerland, the Federal Republic of Germany, and the Netherlands. By comparison, the method has received very little attention in North America and the Anglo-Saxon countries. By and large, surgeons in these countries continue to treat mandibular fractures by intermaxillary fixation, possibly supplemented by the use of interosseous wires. Many recent editions of surgical texts confirm this. Lately, however, there appears to be a surge of interest in methods of functionally stable internal fixation, especially in the United States of America, and AO/ ASIF instruction courses are increasingly in demand. This book is intended to aid course participants in their lessons and practical exercises and also to guide the clinical practitioner in the application

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of AO/ ASIF principles. Basel, September 1988
B.SPIESSL VII Acknowledgments I have received help from many sources. The colleagues of the past 20 years who have contributed to the case material upon which this manual is based are too numerous to credit by name.

This is the first compendium of principles of using locking compression plates in fracture management. With more than 100 cases from world-leading surgeons, including the inventors of the technique, this book will guide orthopedic trauma surgeons, general orthopedists, and residents through applications of the internal fixator technique. Intraoperative photos and illustrations and an interactive DVD containing additional cases, animations, and videos makes this AO Manual an indispensable reference.

Clinical research continues to confirm that no truth is total care of the severely traumatized patient in the first more transitory than that in the sphere of scientific hours following the accident. knowledge. Developments in the field of traumatology at The further development of the AO/ASIF concept led the end of this century provide a striking example of to today's comprehensive craniofacial surgery in the this. As early as 1890 Lambotte carried out osteosynthe- fields of traumatology, orthognatics, tumor, and rec- ses

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with plates and screws. These remained a mere epi-structive surgery. sode, however, until Danis renewed the idea of internal AO/ASIF courses contributed fundamentally to the ?xation 50 years later. Danis combined internal ?xation development of these ?elds. In the course of its wor- with the new technique of interfragmentary compres- wide response, the AO/ASIF philosophy has been able to sion, which led to primary bone healing that allowed full attract distinguished authors to join the faculty of function at the same time. Reacting to disconcerting sta- AO/ASIF courses. By sharing their clinical, experim- tistics about the results of conservative fracture treat- tal, and theoretical experience, they take part in shaping ment, Mueller then applied interfragmentary compres- a special internal ?xation technique in the craniofacial sion to 80 patients in Switzerland and con?rmed its use- skeleton. The philosophical aspect of AO/ASIF courses fulness. in theory and practice assures high standards of quality.

During their 20 years of activity members of the Associa tion for the Study of Internal Fixation (AO - ASIF) have made authoritative contributions to the development of internal and external fixation. The close collaboration of surgeons, basic researchers, metallurgists, engineers and the

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establishment of clinical documentation has made it possible to achieve a solid scientific basis for internal fixation. Clear definitions for the standardization of different types of osteosynthesis were possible: interfragmentary compression, splintage and buttressing as well as combinations of these three techniques. At the same time a scientific and workmanlike instrumentation was developed. The idea was to keep diversification within limits but, however, to assemble a comprehensive collection of implants and instruments to answer all the problems presented by the complexity of bone operations. Osteosynthesis is a difficult and demanding operative method. Its claims on the surgeon and the theatre staff are high. Therefore plans have existed for a long time to supplement the "Manual of Internal Fixation" with a detailed description of the AO Instrumentation, its use and maintenance. Our collaborator FRIDOLIN SEQUIN, graduate engineer, has accomplished this task with expert knowledge. He has organized over many years courses for theatre nurses and has been able from the resulting experience to provide helpful suggestions. When RIGMOR TEXHAMMAR R. N. joined AO-International four years ago, it was natural to include her as a co-author.

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LORENZ BOHLER and his school that they have in the last decade developed and demonstrated so thoroughly the techniques for the conservative management of fractures. Nevertheless there have always been many, including some from BOHLER'S school, who have found considerable place for surgical management, and with the significant progress in general surgery seen in postwar years, a new stimulus has been given to this part of traumatic surgery, especially since bone injuries have become more complex and frequent. The concept of internal fixation is not new. The serious criticisms that have been levelled at it retain today their basic significance. Progress in the fields of asepsis, corrosion-free metal implants, operative experience and postoperative care has diminished the dangers but has not relieved the surgeon of responsibility. The Association for the Study of the Problems of Internal Fixation (AO) has devoted itself over a number of years to the basic principles and best methods of open treatment of fractures by means of extended clinical and scientific studies in order to determine in each individual case the most promising line of treatment. At the same time a well designed and tested instrument set has been developed with precise instructions for the appropriate techniques. As a result, the new observations about primary bone healing which have emerged from the practice of rigid internal fixation are as interesting as the

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uses to which they can be put in allowing early mobilization.

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