

THE URGENCY OF USING TUBINGER'S ORTHOSIS IN TREATMENT OF HIP DYSPLASIA IN CHILDREN

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Currently, little enough attention is paid to one of the types of functional adaptations for conservative treatment of congenital dislocation of the hip — Tubingen Hip Flexion Splint. Tubingen Hip Flexion Splint has proved to be a highly effective orthopedic tool for treating hip dysplasia in Germany and other European countries. It consists of two femoral supports, a middle spacer and a shoulder strap.

The development of this splint was taken into account the conditions for the effectiveness of the treatment. It is very important to reproduce the position that best corresponds to the natural posture of the fetus in the womb of the mother. This position can not be created with the help of other devices for abduction of the hip, as in most cases they do not allow to reach the required angle of hip flexion and are less effective for maintaining it. Human position of the hip in the first place requires maintaining the required angle of bending, while excessive hip dilution is highly undesirable.

At the same time, the restriction of movements in the hip joints of the child should be minimal, since these movements contribute to the development of the acetabulum. Orthosis device prevents uncontrolled dilution of the hips of a child under the influence of their own weight.

Excessive diversion is one of the main causes of necrosis of the femoral head due to a violation of its blood supply, because of the infringement of the limbus between the head of the femur and the acetabulum. In addition, natural thigh movements prevent the risk of developing a "round" back. Since the bent leg position is normal for the child, it is easily achieved and tolerated. In spontaneous movements, the child also has the ability to turn on his side.

All of the above can have a basis for a set of clinical experience in the application of this orthosis for the treatment of hip dysplasia and position it as a priority method in outpatient practice.

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