Ertl Osteomyoplastic Bone Bridge

kate s & lauren p
That’s a lot of words, what does it mean?
The Ertl bone bridge procedure connects the fibula to the tibia
Bone bridge is a cylinder of periosteum extracted from the tibia.
Vascular deficiencies
Diabetes
Trauma
Cancer
Research
How do PT’s play a role with this procedure?

Let’s find out!
Based on the article...

1. Take a thorough examination and identify pt. goals (strong emphasis on work and home environment)

2. Develop a partnership with the patient, have the pt. “Buy-in” to PT and allow for open lines of communication

3. Prepare the individual for use of prosthesis (isometrics, ROM, aerobic capacity)

4. At four weeks, progressive WBing can begin (“scale exercises”)

5. Emotional/psychological support and pt. education needs to be provided to the patient throughout rehab
There is no “gold standard” of how to measure outcomes. It is suggested to use a variety of the following...

- Lower Extremity Functional Scale (LEFS)
- Amputee Mobility Predictor (AMP)
- Two-Minute Walk Test

All together these help measure...

- Patient’s Perception
- Functional use of the prosthetic
- Aerobic capacity of the patient
WBing with and without Bonebridge

80 lbs

8 lbs
We have a role as PT’s to build a life long relationship with these patients...
Ertl Osteomyelitis Bone Bridge...

- Procedure in which bone bridge is used to stabilize the fibula and the tibia
- The limb still receives normal vascular flow after the procedure
- Optimization of weight bearing on residual limb.

Role as PT’s...

- The point of the Ertl procedure is to make a limb that is functional and help the pt. discover their potential
- Remember these is little to no compression associated with this procedure post-op
- Alignment and stability of trunk and limbs
- Active muscle contractions of the residual limb are encouraged
- Progressive end WBing
