


In Response:

Many thanks to Drs Chen, Zhang, and Chang. We agree with their valid point about the risks of approaching the posterolateral aspect of the proximal tibia. The point made by our article regarding the variation of the vascular anatomy has been reiterated here. The approach described by Luo et al is a very elegant method of exposing the posterior aspect of the tibia and one frequently used for posterior buttress plating of the proximal tibia in our unit. This approach can also be a difficult one particularly in muscular individuals and can still endanger the anterior tibial artery in the subgroup of individuals where this vessel has a high takeoff from the popliteal artery and runs deep to the popliteus muscle.

The need for the posterolateral approach is infrequent. In circumstances where the posterolateral cortical segment of the tibial plateau is displaced, this approach would prove useful for reduction and fixation of this fragment. Our aim in performing this study was to better understand the vascular anatomy of the posterolateral aspect of the proximal tibia. We believe that a thorough knowledge of anatomy is essential for approaching the posterior aspect of the tibia and hope that our article facilitates this.

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REFERENCE