Abstract:
Recent advances in chemotherapy and radiation therapy in the treatment of malignant bone tumours as well as the consistent increase of revision arthroplasties have been followed by an increased use of megaprosthesis. These large foreign bodies make infection a common and feared complication. Infection rates of 3 - 31% have been reported (average approx. 15%), often in conjunction with risk factors, e.g. the anatomic region (pelvis implants in particular), implant alloy, and underlying reason for implantation of a megaprosthesis. Apart from the basic principles of septic revision arthroplasty, special patient and implant factors have to be considered in infected megaprosthesis, which we have summarised in our paper (e.g. life expectancy, implant design, spacers and external stabilisation). This article further analyses the current literature available for these cases and summarises outcome after treatment of periprosthetic infections.