## Unified classification of open segment damage and bone fractures Gustilo R.B. and Anderson J.T. (1976, 1984), AO/ASIF E. Muller et all. (1990,1996), et all. (in the modified by Pichkhadze I.M., 2019)

Туре	Pichkhadze in re		Wound location in relation to the	Soft Tissue Damage								Microbial The nature of the fracture		
Gustilo			fracture zone			3 - IO		3 - MT		3 - NV	3 - DO	level	_ DB	
Energy damaged	Wound size  Skin coverage		Which fractures should be classified as	Degree of	The nature	Skin lesion (IO):		Muscle/tendon injury (MT):		Neurovascular	DO - Damage - deficiency of the	According to classification of	rio Def	According to the Clinical and Biomechanical Classification of
Degree of fracture	along the length	around the perimeter	closed and which are open fractures.	Soft Tissue Damage	of the wound:	Wound size Skin coverage	Skin Coverage	Size of muscle and wound along the len perimeter of the limb	gth and	<u>lesions</u> (NV):	skin and underlying soft tissues along the perimeter of a limb segment	infectious complication Infection rate	of the Bone	Fractures – Pichkhadze BCLBF
Low energy damaged. Exposure duration <1 min Monofocal fracture with no or moderate displacement	I ≤1 cm	of a limb segment IO1	Without / With direct penetration into the fracture zone Especially if significant	Minimal, minor muscle damage	A – cut and stabbed B - bruised and torn	IO-1 - skin lesion from the inside outwards in <1 cm, contused edges	Local coverage	MT-1 - no muscle damage – minimal	MT1 - 0 <sup>0</sup>	NV-1 - no neurovascular lesions	DO-1 - there is no shortage.	Clean or minimal. Often the skin is perforated from the inside with a bone fragment. 0% - 2%	N no bone defe ct	Simple fracture pattern with minimal comminution. Periosteum saved. I - Simple Bone Third 1/2/3 A 1/2/3 +/- Extra   Lextra   Lext
II  Moderate energy damaged. Exposure duration < 1 hour	II <u>A</u> >1 cm <5 cm	102 <60°	contamination of the wound The role of antibiotics should not be overestimated	Moderate, more significant muscle damage with areas		IO -2 A - lacerated skin wound a length of 1 cm to 5 cm, contused of wound edges	Local coverage	MT-2 - one muscle group compartment, limited muscle injury - a length from 1 cm to 5 cm	MT2 ->0° -<60°	NV-1 - no neurovascular lesions	DO-1 - there is no shortage.	Moderate contamination. Primary open fracture, from outside to inside. Sites of muscle	N no bone defe ct	Moderate comminution The periosteum is preserved, but there are defects II- Moderate Biomechanical characteristic
Monofocal fracture with moderate or complete displacement	II <u>B</u> > <b>5 cm</b> < <b>10 cm</b>	10 <u>3A</u> <120°		of necrosis		IO -2 B - skin lesion in length from 5 cm to 10 cm, moderate contusion of wound edges	Local coverage	MT-3A - two muscle group compartment, limited muscle injury - in length from 5 cm to 10 cm	MT3 A - >60° - <120°	NV-1 - no neurovascular lesions	DO-2 - skin deficiency up to 5 cm + muscle tissue within the same muscle group. >00 - <300	necrosis. Perhaps the development of suppuration. 2% - 7%	N o	The lever's properties  Monofocal Level of Extra/Intra-articular fragments Congruence  Bone Third   1/2/3   A   1/2/3   +/-   Extra   +/-   No
III A High energy damaged. Exposure duration < 2 hours Polyfocal (Segmental) fracture with displacement	III A Usually >10 cm	10 <u>3B</u> <180°	With direct penetration into the fracture zone, including possibly through the penetrating	Extensive / Severe crushing of soft tissues. Extensive area of muscle necrosis	C – high contused, bruised	IO -3 - skin lesion from outside and greater than 10 cm, contusion, devitalized edges	Local coverage	MT-3B - two muscle groups compartment, considerable injury - in length from 10 cm	MT3 B - >120° - <180°	NV-1 - no neurovascular lesions	DO-1 - there is no shortage.  DO-3 -skin deficiency up to 10 cm + muscle tissue deficiency within two muscle groups.  >00 - <600	Primary open fracture, from outside to inside, with contamination of the wound. 7% - 9% The threat of osteomyelitis.	Y defect e s 2 - bon defect up to 5 cm	Severe comminution or segmental fractures, damage to the periosteum and soft tissues to a limited extent. Closing the bone with soft tissue is not difficult.  IIIA - Severe Polyfocal  - Osteosynthesis > Ex Fix  Bone Third   1/2/3   B   3   +/- Extra +/- Intra +/- No
III B High energy damaged. Exposure duration < 6 hours Polyfocal (Segmental) fracture with displacement There is a very high risk of infection.	Usually >10 cm	104 <270°	wound of the joint located on another adjacent segment of the same limb Do not underestimate the possibility of infection	Extensive / Very severe with a defect in the skin and other soft tissues		IO -4 - significant contusion on to the entire thickness, abrasions, skin defect	Requires free tissue flap or rotation al flap coverage	MT-4 - muscle defect, tendon laceration, extensive contusion - in length from 10 cm	MT4 >180° - <270°	NV-1 - no neurovascular lesions  NV-2 - Isolated nerve damage NV-3 - localized vascular lesion (damage	DO-1 - there is no shortage. DO-4 - skin deficiency up to or more than 10 cm + muscle tissue deficiency of up to three muscle groups. >60° - <180°	Extensive.  With contamination of the wound by the earth.  10% - 50% The threat of deep suppuration and osteomyelitis.	Y defect 3-bone 5 defect up to 9 cm /2 4-bone defect	Severe comminution or segmental fractures Bone fragments are exposed over an extensive length, damage to the periosteum, necrosis and tissue defect.  - Osteosynthesis > Ex Fix  - Oste
III C High-energy and gunshot fractures/ fractures in the compartment syndrome. Exposure duration < 6 hours / > 6 hours Polyfocal (Segmental) fracture	III C Usually >10 cm Open frame with arted damage to requires	rial hat	and the development of osteomyelitis	Extensive / Very severe with a defect in the skin, other soft tissues and damage to the great vessels and nerves.	D – contused and crushed	<b>2</b> - Osteo	synthesis > Ex F	MT-5 - compartment syndrome/ crush syndrome on and skin plastic are inc fix, - respectively the pt of Fixation of Bone Fr		to the intima, occlusion or rupture)  NV-4 - is a common segmental vessel damage  NV-5 - combined neurovascular damage, including subtotal or even total dissection	DO-5 - skin deficiency of more than 10 cm + muscle tissue deficiency of more than four muscle groups.	Extensive. The threat of gangrene of the extremity against the background of Pseudomonas aeruginosa 25% - 50%	y 5- e bone defect over 12cm /2 - in the elderly	