

## Team approach keeps her walking

Little did she know that setting the table would cause her two years of surgeries, pain, and frustration. **Margie Muntz**, a retired bartender of 35 years, was reaching for plates in her cabinet, stepping on her left foot and pivoting onto her right, when she heard a bone break and she fell to the floor.

"It took several firemen to get me out to the ambulance," Muntz recalls. At the time she weighed over 250 pounds, which may have contributed to the extensive fracture in her right hip.

Muntz had surgery at a Tacoma hospital to repair the fractured bone. After recovery time in a nursing home, Muntz ended up making several trips to the emergency room for severe pain. She was later referred to Harborview Medical Center to treat a large, painful blood clot. Her fracture was not healing and on top of that she developed a staphylococcus infection at the site of her previous surgery. When the stainless steel implant used to support her fractured bone failed and broke, she found herself back in surgery again.

"I had my leg opened up 18 times, between surgeries and treatments for the infection and the broken bone that failed to heal," Muntz recalls. "My doctors were as frustrated as I was, I think. They were worried that amputation or spending the rest of my life in a wheelchair might be inevitable when one surgeon recommended a procedure that is usually reserved for people with bone cancer."

The surgery that has made all the difference to Muntz was performed by **Dr. Howard Chansky**, UW professor of orthopaedics and sports medicine at UW Medical Center. Dr. Chansky performed a staged procedure on Muntz in a final attempt to salvage her leg and her ability to walk.



Dr. Howard Chansky

Muntz's leg by removing the infected portion of her fractured hip bone as well as previously placed fracture hardware," says Chansky. "Most of the infected hip bone was temporarily replaced by an artificial hip consisting of methyl-methacrylate (bone cement) filled with high-dose antibiotics. This allowed Mrs. Muntz to begin to walk while it provided a high dose of antibiotics at the site of her infected fracture."

Several months later, with the infection under control, Dr. Chansky removed the temporary hip and then reconstructed the missing hip bone using a titanium hip prosthesis. At the time of this operation there was no evidence of any remaining infection.

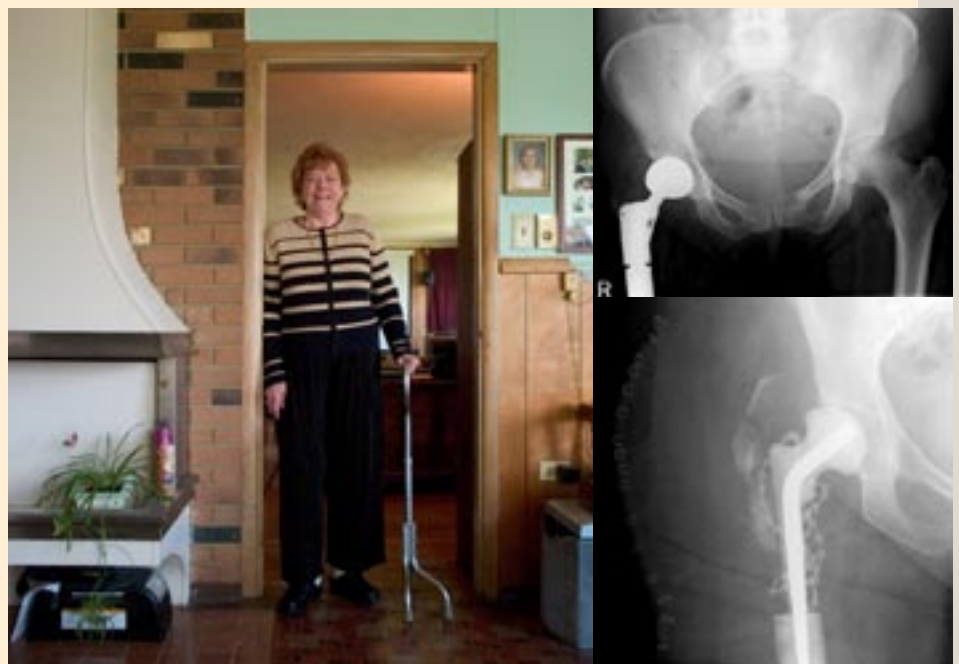
In the team approach that characterizes UW Medicine, Dr. Chansky was assisted by **Dr. Sean Nork**, UW associate professor of orthopaedics and sports medicine, during the first stage of the treatment, and **Dr. Rick Bransford**, UW assistant professor of orthopaedics and sports medicine, during the second stage.

"Mrs. Muntz may, at some point in the future, require replacement of her hip socket, but she and I believed that this was the most extensive surgery she could tolerate that would most rapidly allow her to resume her usual activities," says Dr. Chansky.

Walking with a cane for now, Muntz is building back her strength after two years in a wheelchair. "I was 253 pounds at the time of the break and now I'm 180," Muntz says. "I need to keep the weight off to be able to walk on that leg. I can't wait to get back into my garden and get back to normal. I am grateful to Dr. Chansky and the rest of the UW team for restoring my leg and my optimism about the future."

Dr. Chansky's practice is focused on adult reconstructive surgery and total joint replacement.

For more information about orthopaedics and sports medicine at UW Medical Center, go to [www.orthop.washington.edu](http://www.orthop.washington.edu). Or call the Bone & Joint Surgery Center at 206-598-4288.



Margie Muntz is grateful to Dr. Chansky and the rest of the UW Medical Center team for restoring her leg and ability to walk.