**Abstract**

**Title:** A Case of Heterotopic Ossification in the Adductor Longus following Pubic Symphysis ORIF

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**Case Description:** The patient is a 37-year-old male that presented as a trauma activation after a motorcycle accident. He was GCS 3 in the field and intubated en route. Injuries included an open APC III pelvic injury with left zone 2 sacral fracture, as well as multiple facial fractures, SAH and multiple intra-abdominal injuries requiring massive transfusion protocol and ex-lap. He underwent initial I&D and ex-fix of his pelvis with later ORIF pubic symphysis and SI screw placement during his initial hospital stay. He recovered well from all his injuries, however at his 3-month post-op visit he was found to have developed clinically painful and ultimately restrictive heterotopic ossification (HO) of the right proximal thigh. After maturation, the decision was made to surgically remove the prominent HO. A 12.5cm x 5.5cm osseous mass was found to originate from the inferior pubic body and was successfully dissected out of the adductor longus muscle. Post-operative prophylactic indomethacin was prescribed. Post-operatively the patient had resolution of symptoms and has had no local recurrence to date.

**Discussion:** Heterotopic ossification is the pathological formation of bone in soft tissues. Risk factors include fractures, ORIF, joint replacement, specific extensile approaches to the hip or elbow, as well as associated TBI. In this case, our patient had multiple risk factors including local trauma, pelvic fixation, and TBI, with resultant HO that formed in the adductor compartment of the thigh.

**Conclusion:** Heterotopic ossification can be severely impacting to a patient’s life causing pain and movement restrictions requiring activity modification. This was a case of HO in a patient with a multitude of known risk factors and development within a unique location who was ultimately successfully treated with surgical excision.