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Outcome of delayed internal fixation of distal radius fractures

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Displaced unstable distal radius fractures are traditionally treated with early open reduction and internal fixation to achieve favorable outcomes. In contrary, there is still paucity of data regarding outcomes following delayed internal fixation for these types of fractures. The objective of the study was to determine the outcome after delayed internal fixation of distal radius fractures in the Philippine Orthopedic Center. Patients with nascent distal radius fracture (4 to 16 weeks) who met the inclusion criteria were enrolled in a consecutive case series study. The wrist range of motion, radiographic parameters, and DASH scores were measured pre-operatively, postoperatively at 2 weeks, 1 month, 2 months, 3 months, 6 months and 1 year. There were 40 patients in the study with a mean age of 36.1 years of age. Immediate post-operative radiographic measurements showed mean radial height of 11.7mm, mean radial inclination of 22.1 degrees, mean palmar tilt of 4.9 degrees, mean ulnar variance of -1.6mm, and AP diameter of 18.2mm. At 1 year of fracture healing, mean radial height was 11.6mm, mean radial inclination was 21.8 degrees, mean palmar tilt was 5.1 degrees, mean ulnar variance was -1.6mm, and AP diameter was 21.8mm. The average score in the Disabilities of the Arm, Shoulder and Hand (DASH) questionnaire was 6.24. and all patients achieved functional range of motion of the wrist. The results of the study suggest that internal fixation is a viable option for nascent distal radius fractures.

Recent Publications

1. Rozental TD, Makhni EC, Day CS, et al: Improving evaluation and treatment for osteoporosis following distal radial fractures. A prospective randomized intervention, J Bone Joint Surg Am 90:953-961, 2008

2. Rozental TD, Blazar PE. Functional outcome and complications after volar plating for dorsally displaced, unstable fractures of the distal radius. J Hand Surg Am. 2006; 31:359- 365.

3. Gluck JS, Chhabra AB. Loss of alignment after closed reduction of distal radius fractures. J Hand Surg Am. 2013;38(4):782-783.

4. Jupiter JB, Ring D. A comparison of early and late reconstruction of malunited fractures of the distal end of the radius. J Bone Joint Surg Am. 1996; 78:739-748.

5. Weil YA, Mosheiff R, Firman S, et al. Outcome of delayed primary internal fixation of distal radius fractures: a comparative study. Injury. 2014; 45:960-964

Biography

Rodolfo B. Garcia III is an Orthopedic Surgeon and had his training from the Philippine Orthopedic Center. Dr. Garcia conducted research on delayed internal fixation of distal radius fractures. In contrary to most studies where distal radius surgery was done immediately, the respondents in their study underwent open osteoclasis and internal fixation 4 to 16 weeks afterinjury.

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