

عنوان مقاله:

Variation in Treatment for Trapeziometacarpal Arthrosis

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خلاصه مقاله:

Background: Treatment recommendations for trapeziometacarpal (TMC) arthrosis are highly variable from surgeon to surgeon. This study addressed the influence of viewing radiographs on a decision to offer surgery for TMC arthrosis. **Methods:** In an online survey, 92 hand surgeons viewed clinical scenarios and were asked if they would offer surgery to 30 patients with TMC arthrosis. Forty-two observers were randomly assigned to review clinical information alone and 50 to review clinical information as well as radiographs. The degree of limitation of daily activities, time since diagnosis, prior treatment, pain with grind, crepitation with grind, and metacarpal adduction with metacarpophalangeal hyperextension were randomized for each patient scenario to determine the influence of these factors on offers of surgery. A cross-classified binary logistic multilevel regression analysis identified factors associated with surgeon offer of surgery. **Results:** Surgeons were more likely to offer surgery when they viewed radiographs (42% vs. 32%, $P = 0.01$). Other factors associated with variation in offer of surgery included greater limitation of daily activities, symptoms for a year, prior splint or injection, deformity of the metacarpophalangeal joint. Factors not associated included limb dominance, prominence of the TMC joint, crepitation with the grind test, and pinch and grip strength. **Conclusion:** Surgeons that view radiographs are more likely to offer surgery to people with TMC arthrosis. Surgeons are also more likely to offer surgery when people do not adapt with time and nonoperative treatment. Given the notable influence of surgeon bias, and the potential for surgeon and patient impatience with the adaptation process, methods for increasing patient participation in the decision-making process merit

کلمات کلیدی:

Decision-making, interobserver variation, Osteoarthritis, Surgery, Trapeziometacarpal arthrosis, Treatment

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