

عنوان مقاله:

Conservative Management of Varus/Valgus Stable Tibial Plateau Fractures in Osteoporotic Bone - Preliminary Results and Considerations

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نویسندگان:

Jiang An Lim - Department of Trauma and Orthopaedics, Addenbrookes Major Trauma Unit, Cambridge University Hospitals, United Kingdom-
Department of Trauma and Orthopaedics, Addenbrookes Major Trauma Unit, Cambridge University Hospitals, United Kingdom

Cavan West - Department of Trauma and Orthopaedics, Addenbrookes Major Trauma Unit, Cambridge University Hospitals, United Kingdom - School of
Clinical Medicine, University Of Cambridge, Cambridge, United Kingdom

Jiang Rong Lim - Department of Trauma and Orthopaedics, Addenbrookes Major Trauma Unit, Cambridge University Hospitals, United Kingdom-
University of Liverpool Medical School, Cedar House, Ashton St, Liverpool, L69 ۳GE, United Kingdom

Azeem Thahir - Department of Trauma and Orthopaedics, Addenbrookes Major Trauma Unit, Cambridge University Hospitals, United Kingdom

Matija Krkovic - Department of Trauma and Orthopaedics, Addenbrookes Major Trauma Unit, Cambridge University Hospitals, United Kingdom

خلاصه مقاله:

Objectives: While operative fixation is the current recommendation for treating significantly displaced tibial plateau fractures (DTPFs) in elderly patients, our research suggests that non-operative management may also be a viable option as the primary treatment for these individuals. Our study aimed to evaluate the clinical outcomes of patients with complex DTPFs who received non-operative management as their primary management. **Methods:** Our study involved a retrospective analysis of non-operatively treated DTPFs during the period of ۲۰۱۹ to ۲۰۲۰. We included all patients for the evaluation of fracture healing and range of motion (ROM). Additionally, we conducted functional outcome assessments on all patients, utilizing the Oxford Knee Score (OKS) both before their injury and at the ۱۰-month mark after their injury. **Results:** The study included ۱۰ patients, comprising two males and eight females, with a mean age of ۶۲.۹ years (range: ۴۶-۷۴). Among them, four patients had Schatzker Type III DTPFs, two had Type V, and four had Type VI. Non-operative management was administered using hinged-knee braces, and patients progressed to weightbearing gradually, with a minimum follow-up period of ۱۰ months. The average time to bone union was ۴.۳ months (range: ۲-۷). The mean Oxford Knee Score (OKS) after the injury was ۳۸.۸ (range: ۲۳-۴۵), with an average reduction of ۱۶.۹% ($p = ۰.۰۰۳$). The average fracture depression was ۱۱.۴۱ mm (range: ۴.۲-۲۹), and the average fracture split was ۱۴.۰۳ mm (range: ۵.۵-۴۴). **Conclusion:** Based on our study, it appears that elderly patients with significantly displaced tibial plateau fractures (DTPFs) can be treated non-operatively as their primary management, despite the current consensus suggesting otherwise. **Level of evidence:** IV

کلمات کلیدی:

Elderly, Non-operative management Orthopaedic Surgery, Tibial plateau fractures

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