

Presentationer på EFORT 2022 Lissabon

Fullständiga abstrakt kan sökas fram på <https://congress.efort.org/advanced-scientific-programme> tex genom att använda ”speaker” och sökfunktionen.

Muntliga presentationer

Low Rate Of Conversion To Arthroplasty After Fixation Of Undisplaced Femoral Neck Fractures. Results From A National Register Cohort Of 5,909 Individuals.

Johan Lagergren et al.

Samkörning mellan SFR och SAR för patienter >60 med odislocerad collum femorisfraktur.

Konvertering inom 1, 2 och 5 år till protes.

7,2% reopererades med protes inom 1 år, 9,7% inom 2 och 13,2% inom 5 år.

Konklusion:

The rate of conversion to arthroplasty after primary surgery with IF in undisplaced FNF increased over a time period of 5 years and then leveled off around 13%, indicating that longer follow up than 1-2 years is appropriate. The risk for reoperation with arthroplasty was higher in women, but women had lower risk of mortality. Surgeon experience did not influence the risk of reoperation with arthroplasty. We trust our primary outcome to be correct, due to high completeness in a mature national arthroplasty register.

Hip Arthroplasty As Primary Treatment Of Extracapsular Hip Fracture. A Register-Based Study Of 137 Cases.

Pia Gadell et al

Samkörning SFR och SAR för att analysera reoperationer och mortalitet efter PTFF som primärt behandlats med protes.

3,6% (5st) av 137 patienter >60 år reopererades inom 1 år. Mortaliteten var 35% i denna patientgrupp inom 1 år.

Konklusion:

Only 3.6% of the patients with hip arthroplasty as primary treatment of extracapsular hip fracture underwent secondary surgery. With this outcome in mind, a primary arthroplasty may be an alternative in selected cases of extracapsular hip fractures. The relatively high mortality and ASA class signals that frailer individuals were selected for arthroplasty procedures which in turn biases the risk of reoperations in case of complications. Our cohort is, to the best of our knowledge, the first national one based on registers with validated completeness.

Conversion To Secondary Arthroplasty After Femoral Neck Fractures In 805 Younger Patients Treated With Internal Fixation; A National Register-Based Study.

Sebastian Strøm Rönquist et al

Samkörning SFR och SAR på patienter <60 år med collum femorisfraktur för att analysera sekundär åtgärd med protes.

805 patienter som behandlats med internfixation med parallella skruvar, spikar eller DHS inkluderades.

13,7% av patienterna konverterades till protes inom en medeluppföljningstid på 3,5 år. 21% av de dislocerade och 7% av de icke-dislocerade collumfrakturerna konverterades till protes.

Konklusion

Our register-based study is the largest one to date and adds updated knowledge on the results after IF due to FNFs in younger patients. The conversion rate from IF to secondary arthroplasty, especially for dFNFs where one in five was converted, indicates there might be room for improvement of the primary treatment.

Finns att läsa i sin helhet <https://actaorthop.org/actao/article/view/3038>

Posterpresentationer EFORT

No Difference In Rate Of Conversion To Hip Arthroplasty After Intramedullary Nail Or Sliding Hip Screw For Extracapsular Hip Fractures - An Observational Cohort Study Based On Data From National Registers

Helmi-Sisko Pyrhönen et al

Samkörning mellan SFR och SAR för patienter >60 år med PTFE. Finns en skillnad i konvertering till protes efter operation med DHS eller märgspik?

Konklusion:

Considering rate of conversion arthroplasty, IMN and SHS perform equally well in general. But in type 31-A3 fractures, IMN seems to be a preferable choice of primary implant. IMN results in more reoperations overall than SHS, mainly due to implant removal procedures. In clinical perspective, our data add to the controversy around A2 fractures: Either we can choose to be concerned regarding more IMN reoperations and ask for more high-quality studies. Or we can be satisfied with two equally good treatment regimens when looking at the same rate of conversions to arthroplasty.

Accepterad i JBJS Am.

Stress Fractures Of The Femoral Neck: An Observational Cohort Based On The National Fracture Register.

Jonas Sundkvist et al

Beskriva epidemiologin av stressfrakturer (M84.3) i collum femoris utgående från SFR. Patienternas journal granskades.

Konklusion:

Stress fractures in the femoral neck affect both young and old patients. There is a substantial risk of late surgery due to complications if initially treated nonoperatively.

Finns att läsa i sin helhet <https://actaorthop.org/actao/article/view/2460>