

P08 MEDICO-SOCIAL IMPLICATIONS OF THE OSTEOPOROTIC PROXIMAL HIP FRACTURES

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This work aimed to study medico-social implications of the osteoporotic proximal hip bone fractures and their efficient treatment by various methods. 193 patients with a given trauma and being treated in emergency hospital unit during 1996-2001-year period were examined.

Materials and methods. For treating hip bone neck medial fractures, the operational methods (osteosynthesis with screws and one-sided noncement endoprosthesis of the hip joint) were used. In the presence of contraindications (psychic disorders, decompensated cardiovascular and respiratory diseases, malignant tumors, etc.), an instantaneous fracture repositioning and an immobilisation by Whitman's derotational

plaster boot were performed. For treatment of fractures in the trochanter area, the skeletal traction or osteosynthesis with a bone plate were used. The effect of treatment was assessed according to clinical scale.

Results. 20% patients of total number died within study time, 87% of whom died during first year. Followings were the causes of deaths: 42% myocardial infarction; 42% hypostatic complications; 5% malignancy; 11% other causes. All of above patients presented medial fractures of femoral neck. Of them, 80% were treated by conservative methods (immobilisation by derotational plaster boot), 20% by means of an osteosynthesis with screws and one-sided noncement endoprosthesis of the hip joint.

Among 155 patients, 20 subjects with medial fractures of femoral neck were treated by conservative methods. Of them, 80% were 70-79-old subjects, 20% were persons aged 80 and over. The majority in this group were women (80%). Good results were observed in 5%, satisfactory in 15% and unsatisfactory in 80% of patients. The patients treated by an osteosynthesis with screws made 25%. Good results of treatment were found in 42%, satisfactory in 22%, and unsatisfactory in 36% of patients. Of note, the highest percentage of positive results of treatment was seen in the group of 50-49-year olds (75%), the lowest in the group of patients beyond 70 (nearly 50%). The group of patients with one-sided noncement hip joint (fracture) endoprosthesis was composed of 44 patients: 16 men (36%) and 28 women (64%). The patients were ascribed to following age groups: 50-59 years – 5 pts; 60-69 years – 11 pts. Good results of treatment were found in 37%, satisfactory in 48%, and unsatisfactory in 15%. In age group 50-59 years, the satisfactory and good results were found in 2 and 3 patients, respectively. In the group of 60-69-year olds there were good results in 2 pts, satisfactory in 6 pts and unsatisfactory in 3 pts. In age group 70-79 years, good results of treatment were found in 9 pts, satisfactory in 12 pts, and unsatisfactory in 4 pts. The group with fractures in the trochanter area included 45 patients, who were treated operationally and conservatively. When performing an osteosynthesis with a bone plate, the good results were seen in 81% and satisfactory in 19 %; while with a skeletal traction there were good results in 73% and satisfactory

results in 27 %.

In conclusion, the findings of study indicate serious medico-social implications of the osteoporosis and its gravest complications – the proximal hip fractures. When choosing proper therapy tactics, one should take into account the patient's age, type of fracture, overall health condition as well as the pronouncement of bone tissue structural-functional state disturbances.