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Open fractures: Should they be managed in centres with no orthoplastic service?

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Background: BOAST guidelines for open fractures (2017) recommend that open fractures should be managed by an orthoplastic team.

Aim: This study aims to evaluate how the absence of an on-site plastics service in a major trauma centre can impact the outcomes of open fracture management.

Setting: Manchester Royal Infirmary, NHS Major Trauma Centre, UK

Methods: A retrospective service evaluation exercise was conducted to assess the outcomes of open fractures managed at our centre over a 15-month period. This was audited against BOAST guidelines. The outcomes of patients with open fractures requiring plastics input was compared to those who did not require involvement of plastics.

Results: 57 patients were identified during the study's period. Initial management was carried out solely by Trauma & Orthopaedic surgeons. Following initial debridement, 10 patients were identified as requiring plastics input for wound closure. This was sought via an online referral system to another hospital which is part of our trust. The results of the study demonstrated that definitive wound closure within 72 hours, as advised by BOAST guidelines, was achieved in only 10% of cases that required plastics input compared to 77% of cases where plastics were not required. Definitive fracture management within 72 hours occurred in only 40% of cases that required plastics input compared to 81% in cases that did not. Infection was also recorded in 42 % of cases where wound closure was delayed beyond 72 hours, compared to less than 3% of cases where the wound was closed within the appropriate time period.

Conclusion: Lack of an onsite plastics service can have a negative outcome on the management of open fractures especially in relation to delayed wound closure and delayed fixation. We suggest that open fractures should only be managed in centres with an on-site orthoplastic service.

Biography

Louai Abdeh is Trauma & Orthopedics Core Surgical Trainee at the Manchester Royal Infirmary. As a medical student and junior doctor, he have taken an active role in many clinical governance and research projects, and he have presented at a number of conferences including the ASiT International Conference 2018, Barts and London National Undergraduate Surgical Conference and Warwick Undergraduate Regional Medical Conference. He have also completed a Master of Research in Tissue Engineering for Regenerative Medicine, and he received a distinction grade for my dissertation "The Role of Macrophages and Mast Cells in Fibroblast to Myofibroblast Differentiation- An insight into the Relationship between Inflammatory Cells and Fibrosis".

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