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Open reduction and internal fixation versus radial head arthroplasty for Mason III radial head fractures: Appraising the current literature evidence

Shady Hermena

Worcestershire Royal Hospital, UK

Background: Fractures of the radial head are common and account for one-third of elbow fractures. The management has evolved over the past few decades as have the techniques and implants used to treat them. However, no standardized treatment protocol exists because of the complexity with which these fractures may present. The complex, unstable, displaced and multi-fragmentary fractures, also known as Mason type III fracture, remains one of the most challenging fractures to treat, especially if associated with other elbow injuries. There are various surgical treatment options available, including open reduction and internal fixation or radial head arthroplasty.

Objectives: The purpose of this study was to systematically review the current literature that assessed open reduction and internal fixation compare to radial head replacement to identify the best surgical treatment protocol for the management of Mason type III radial head fracture.

Study selection: All published clinical trials claiming to evaluate or cited elsewhere as being authoritative regarding the surgical treatment of radial head fractures were identified and evaluated. Studies in foreign languages (not in English) were excluded.

Conclusion: Based on two randomized controlled trials, this review showed some weak evidence that arthroplasty results in better functional elbow outcome and less complication rate than open reduction and internal fixation. There is scarcity in good quality comparative studies, and consideration to multi-center randomized controlled trial should be considered.

Biography

Shady Hermena is trauma and orthopaedic middle grade in Yeovil District Hospital NHS Foundation Trust. Shady was graduated from the faculty of medicine at Assiut University in Egypt in 2007. He completed his basic training in trauma and orthopaedic surgery in Egypt. He was awarded a master's degree in trauma and orthopaedic surgery from Assiut university (Egypt) after completing primary research evaluating the results of using the Triple Neurotization technique for reconstruction of upper trunk brachial plexus in adult injuries. In 2016, he was awarded the membership of the Royal College of Surgeons of England. In 2017 he moved his training to the UK and started to work in the NHS.

shadypaulis@hotmail.com