

琉球大学学術リポジトリ

上腕骨近位端骨折の手術成績： 順行性髄内釘とロッキングプレートの比較

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ABSTRACT

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This study aimed to compare the postoperative shoulder range of motion (ROM) and complication rates in patients with proximal humeral fractures that were treated with antegrade intramedullary nails or locking plates. Between 2008 and 2016, the shoulders of 108 patients with proximal humeral fractures underwent internal fixation using antegrade intramedullary nails (N group) or locking plates (P group). Of these, 42, 48, and 18 shoulders exhibited two-, three, and four-part fractures, respectively. For patients with three- or four-part fractures, the mean age in the P group was significantly less compared with that in the N group. The mean operation time, blood loss, and postoperative follow-up period did not significantly differ between the N and P groups. The external rotation of two-part fractures in the N group was significantly better than in the P group. The external rotation of three- and four-part fractures in patients aged 65–74 years was significantly better in the N group than in the P group. For two-part fractures in the N group, forward flexion was better in patients aged <65 years than in those aged ≥65 years. In three- and four-part fractures, forward flexion was better in patients aged 65–74 years than in those aged ≥75 years in the N group, and it was better in patients aged <65 years than in those aged ≥75 years in the P group. In three- and four-part fractures, external rotation was better in patients aged 65–74 years than in those aged ≥75 years in the N group and better in patients aged <65 years than in those aged ≥65 years in the P group. Only one patient with a three-part fracture in the P group exhibited nonunion. Avascular necrosis was more likely to occur in patients with three- and four-part fractures. Varus deformity was likely to frequently occur in patients with two-part fractures in the P group. Surgical treatment of proximal humeral fractures provided comparable clinical results in the N and P groups. Except for external rotation, patients with two-part fractures in the N group showed better outcomes than those in the P group. Moreover, elderly patients exhibited poor ROM.

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2 Key words: proximal humeral fractures, antegrade intramedullary nails, locking plates, avascular

3 necrosis, varus deformity

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