

NMA/AGSM/2022/SURG/003 - Femoral Fracture Fixation: Outcome of 108 Consecutive Fixations in a Tertiary Hospital

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Abstract

Background: Femoral shaft fractures are common orthopaedic problems and usually result from high-energy impact with an increased risk of associated injuries. Though the global trend is moving towards early and effective fixation of fractures using options that cause minimal disruption of the soft tissue envelope around the fracture site, the practice in countries with weak health systems may vary from standard as predicted by available resources and skill. This study aims to present the outcome of the surgical fixation of 108 femoral shaft fractures within three years.

Methodology: Patients who met the inclusion criteria were recruited into the study after consent was obtained. Data were analyzed using SPSS 17 for Windows and results were presented in frequency tables. Graphs and charts.

Result: Femoral shaft fractures represent 3.8% of the total number of patients with orthopaedic conditions within the study center at the period of the study. The Mean Age Was 31.2 ± 14.7 years With An M: F Ratio Of 2.1:1. There were more closed fractures (97; 89.2%) than open fractures (11, 10.8%) with transverse fractures being the most common fracture pattern (50.5%, N=46/108). Most Fractures were treated by open reduction and locked intramedullary nailing (78/108, 72.5%) with bone union rates of 75% and 96% at 12 weeks and 18 weeks post-Intervention respectively. There was no statistically significant difference in the union rate between the interlocking group and the plating group at both 12 weeks and 18 weeks post-intervention ($p=0.24$). Bone infection, non-union, and mal-union rates were 1.8% ($n=2/108$)

Conclusion: Femoral diaphyseal fractures can be effectively fixed with open-locked nailing with optimal options not available.

Keywords: Fractures; Femoral Shaft; Open Nailing.

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