Modifications in implant features in the TFNA proximal femoral nail as successor of a more conventional intramedullary nail were associated with an increase in fixation failure rate.

No registrations found.

Ethical review Positive opinion

Status Recruitment stopped

Health condition type -

Study type Observational non invasive

Summary

ID

NL-OMON21440

Source

Nationaal Trial Register

Brief title

TFNA vs GTN3

Health condition

Trochanteric fractures

Sponsors and support

Primary sponsor: None

Source(s) of monetary or material Support: None

Intervention

Outcome measures

Primary outcome

Implant related fixation failure

Secondary outcome

Failure mechanism

Study description

Background summary

The aim of this study was to evaluate failure rates of the TFN-Advanced Proximal Femoral Nailing System (TFNA; DePuy Synthes) versus one of its predecessors and to evaluate the responsible mechanisms of fixation failure.

In 2016 the TFNA was introduced in our institution as successor of the Gamma Trochanteric Nail (GTN3; Stryker). All trochanteric fractures treated surgically from 2011 to 2019 were retrospectively reviewed for fixation failure. Patients suffering from pathologic fractures were excluded. Fixation failure was defined as the occurrence of an implant related complication subclassified as implant cut-out, implant breakage, non-union or malpositioning of the screw/blade. For all cases age, gender, body mass index (BMI), smoking status, comorbidity score (American Society of Anesthesiologists (ASA)), fracture type (AO) and implant positioning (tip-apex-distance) were identified. Missing data were imputed via multiple imputation by chained equations. Propensity score matching was used to balance distributions of covariates and to compare failure rates between TFNA and GTN3 groups.

Study objective

No improvement of fixation failure will be found after the introduction of the TFNA

Study design

Start 07/2020

Finish 02/2021

Implant related fixation failure and the responsible failure mechanism were defined as the occurrence of (1) implant cut-out, (2) implant breakage, (3) non-union, (4) malpositioning of the screw/blade in the femoral head.

Patients were treated with an intramedullary nail following a trochanteric fracture between June 2011 and July 2019. Electronic files were searched for the occurrence of failure in August 2019.

Contacts

Public

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0649786838

Scientific

Rijnstate hospital Peter Schmitz

0649786838

Eligibility criteria

Inclusion criteria

Trochanteric fracture treated with a TFNA or GTN3 nailing system

Exclusion criteria

pathological fracture

Study design

Design

Study type: Observational non invasive

Intervention model: Factorial

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: Active

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 01-07-2020

Enrollment: 1000

Type: Actual

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion

Date: 15-12-2020

Application type: First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

NTR-new NL9149

Other LHC Rijnstate: 2020-1596

Study results