Volar or dorsal approach for the proximal row carpectomy: a randomized clinical multi-centre trial

Published: 13-06-2006 Last updated: 14-05-2024

Evaluation of the approach, both volar and dorsal: By means of function of the wrist, pain scores, complications and extra surgery.

| Ethical review | Not approved |
|-----------------------|-----------------|
| Status | Will not start |
| Health condition type | Joint disorders |
| Study type | Interventional |

Summary

ID

NL-OMON30413

Source ToetsingOnline

Brief title Approach of the proximal row

Condition

• Joint disorders

Synonym

lunate and triquete, resection of the proximal row; extirpation of the scaphoid

Research involving Human

Sponsors and support

Primary sponsor: Universitair Medisch Centrum Utrecht **Source(s) of monetary or material Support:** Ministerie van OC&W

Intervention

Keyword: carpal instability, proximal row carpectomy, volar approach, wrist

Outcome measures

Primary outcome

Evaluation of both means (volar and dorsal). Comparison of pre- and

postoperative results: range of motion, grip strength, VAS painscore and DASH

score.

Secondary outcome

Adhesions is measured by restricted flexion and slow progression.

Displacement of the head of the capitate to ulnar is measured by means of

radiographs.

Study description

Background summary

A proximal row carpectomy (scaphoid, lunate, triquete) is excised for different reasons. Usually, surgery is performed by means of a dorsal approach. Since 2004, the volar approach is used for proximal row carpectomies at the university hospital of Utrecht. We expect more adhesions and therefore extra surgery through the dorsal approach.

Study objective

Evaluation of the approach, both volar and dorsal: By means of function of the wrist, pain scores, complications and extra surgery.

Study design

Prospective, randomised, clinical multi-centre trial.

Intervention

One group will undergo the proximal row carpectomy by means of a volar approach and the other group by means of the dorsal approach.

Study burden and risks

Both groups will undergo the same operation. Only the approach is different. Both methods are being excised in Dutch hospitals. The extent of the burden exists of only an extra postoperative screening and radiographs. For this reason, we do not expect mental of physical stress or damage for any of the groups.

Contacts

Public Universitair Medisch Centrum Utrecht

Postbus 85500 3508 GA Utrecht Nederland **Scientific** Universitair Medisch Centrum Utrecht

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

Will-competent adults who consider proximal row carpectomy.

Exclusion criteria

Degenerative disorders of the lunate fossa or capitolunate joint

Study design

Design

| Study type: | Interventional |
|---------------------|-----------------------------|
| Intervention model: | Parallel |
| Allocation: | Randomized controlled trial |
| Masking: | Open (masking not used) |
| Control: | Active |
| Primary purpose: | Treatment |

Recruitment

| NL Recruitment status: | Will not start |
|---------------------------|----------------|
| Enrollment: | 60 |
| Туре: | Anticipated |

Ethics review

| Not approved | |
|--------------------|---|
| Date: | 13-06-2006 |
| Application type: | First submission |
| Review commission: | METC Universitair Medisch Centrum Utrecht (Utrecht) |

4 - Volar or dorsal approach for the proximal row carpectomy: a randomized clinical ... 6-05-2025

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 CCMO **ID** NL11323.041.06