The efficacy of surgical treatment of Jones and stress fractures of the fifth metatarsal in athletes

Published: 09-03-2011 Last updated: 04-05-2024

To assess functional recovery after treatment with intramedullary screw fixation in athletes with a Jones or stressfracture of the fifth metatarsal.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Fractures
Study type	Observational invasive

Summary

ID

NL-OMON36441

Source ToetsingOnline

Brief title Efficacy of treatment of MT5 fracture in athletes

Condition

• Fractures

Synonym fifth metatarsal fracture; broken 5th metatarsal bone

Research involving Human

Sponsors and support

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

Intervention

Keyword: athletes, jones fractures, stress fractures, surgical treatment

Outcome measures

Primary outcome

The AOFAS midfoot score will be used as our primary study parameter.

Secondary outcome

Tegner score, VAS FA score, patient satisfaction measured with a Likert scale,

if there are complains of the screw and whether the screw has been removed,

whether there are complains of the non-injured foot, if refracturing has

occurred, whether shoe adjustments where necessary. Furthermore, we will assess

the level of pain, swelling, deformity, range of motion (ROM) of the

foot/ankle, varus/valgus hindfoot alignment and eversion strength by physical

examination. Gait and plantar pression distribution analysis will be done with

a footscan and we will assess the degree of fracture healing with an X-ray.

Study description

Background summary

Proximal fifth metatarsal fractures, which can be divided into Jones and stress fractures, are frequently seen in athletes. These fractures are most frequently related to chronic stress and are commonly seen in soccer and basketball players. Jones and stress fractures can be treated conservatively or operatively, but the time to union is longer in conservative treatment and the non-union chance is higher compared to surgical treatment. That is why operative treatment is recommended for the athlete. Several operation techniques have been described, but the optimal surgical treatment has not been determined. Intramedullary screw fixation has become a preferred method for treatment of Jones and stress fractures of the fifth metatarsal in athletes.

Study objective

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To assess functional recovery after treatment with intramedullary screw fixation in athletes with a Jones or stressfracture of the fifth metatarsal.

Study design

Cross sectional study.

Study burden and risks

There is no direct benefit for the patient from participating in the study. The burden is primarily time (a sole visit to our outpatient clinic and some questionnaires).

Contacts

Public

Erasmus MC, Universitair Medisch Centrum Rotterdam

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age Adults (18-64 years)

Elderly (65 years and older)

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Inclusion criteria

Athletes who have been treated for a Jones or stress fracture in the period between 2006-2010, with an age of 18 years or older, and have been treated in the Erasmus MC by screw fixation.

Exclusion criteria

Insufficient command of the Dutch language, spoken and/or written.

Study design

Design

Study type: Observational invasive	
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	15-03-2011
Enrollment:	15
Туре:	Actual

Ethics review

Approved WMO	
Date:	09-03-2011
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

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** NL34674.078.10