

# 3D Virtual Surgery In an Orthopaedic-trauma Network (3D ViSION trial)

**A randomised-controlled study initiated by the department of Trauma Surgery, Orthopaedic Surgery and the 3D lab of the University Medical Center Groningen**

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To assess the following research questions: 1. Does the use of 3D virtual preoperative planning of surgery improve functional outcome as measured by Patient-Reported Outcome in comparison to conventional surgery (using conventional radiographs and/...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Bone and joint injuries
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON51389

### Source

ToetsingOnline

### Brief title

3D ViSION trial

### Condition

- Bone and joint injuries
- Bone and joint therapeutic procedures

### Synonym

ankle and wrist; bone fractures involving the joint, intra-articular fractures of the knee

## **Research involving**

Human

## **Sponsors and support**

**Primary sponsor:** Universitair Medisch Centrum Groningen

**Source(s) of monetary or material Support:** Ministerie van OC&W

## **Intervention**

**Keyword:** 3D virtuele surgery, Intra-articular fractures, pre-operative planning

## **Outcome measures**

### **Primary outcome**

1. The primary endpoint is patient-reported outcome, which will be assessed with validated follow-up questionnaires.

### **Secondary outcome**

2. The secondary endpoint is the residual fracture displacement (gap and step-off in mm), as measured on the postoperative CT-scan.

3. The tertiary endpoint is operation efficiency in terms of operation time (minutes), blood loss (mL) and radiation exposure (mGym2).

4. The last endpoint is the cost effectiveness.

## **Study description**

### **Background summary**

In surgical treatment of intra-articular fractures, achieving an optimal anatomical reconstruction improves the functional outcome. These fractures often consist of complex fracture patterns with multiple fragments displaced in different directions, and are considered among the most complicated fractures to treat. Currently, the surgical strategy is based on conventional imaging methods such as plain radiographs and/or a 2D CT scan. However, 2D assessments of these complex multi-directional fractures are known to be highly user

dependent and tend to underestimate the displacement. 3D visualizations of the fracture might provide the surgeon with a better understanding of the fracture. Pre-operative 3D virtual planning could therefore help to improve the surgical outcome in terms of quality of the fracture reduction and reduce operation time, blood loss and radiation exposure.

## **Study objective**

To assess the following research questions:

1. Does the use of 3D virtual preoperative planning of surgery improve functional outcome as measured by Patient-Reported Outcome in comparison to conventional surgery (using conventional radiographs and/or 2D CT images)?
2. Does the use of 3D virtual planning of the surgery improve fracture reduction?
3. Does the use of 3D virtual planning of surgery increase operative efficiency in terms of operation time, blood loss and radiation exposure?
4. What is the cost effectiveness of 3D assisted surgery?

## **Study design**

All patients who will be included in this Randomized Controlled trial will be operated for an intra-articular fracture of the wrist, knee or ankle and randomized between preoperative planning with conventional imaging (control group) or a 3D virtual fracture model (intervention group).

## **Intervention**

In the intervention group, surgery will be prepared by using a 3D virtual fracture model (based on the CT images) in addition to conventional imaging. In the control group the preoperative planning will be performed by using conventional imaging (i.e. radiographs and/or 2D CT images) according to the standard of care.

## **Study burden and risks**

The extent of burden and risks for patients participating in the study is considered low, because the operative procedure itself will not change. The surgery and follow-up will be performed according to the standard of care. The only addition is that in the intervention group surgery will be prepared by using a virtual 3D model of the fracture as an addition to the conventional images. The operative procedure itself won't change. With the outcome of this study, we intend to present the results at international conferences and publish them in international peer-reviewed journals.

## Contacts

### Public

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

- Acute fractures (<3 weeks after the initial injury)
- Fracture of one of the following body regions (distal Radius, proximal Tibia, distal Tibia/Ankle, see table below for specific fracture types that are eligible for inclusion)
- Operative treatment
- Availability of a diagnostic (Pre-operative) CT-Scan available (Slice thickness  $\leq 1$  mm)
- Age  $\geq 18$  years
- Understanding of the Dutch language

Table: Fracture types which are eligible for inclusion.

Nr Fracture Location AO classification

1 Radius Distal 2R3B; 2R3C  
2 Tibia Proximal 41B; 41 C  
3 Tibia/Ankle Distal 43B; 43C / 44B/C with tertius fragment

## Exclusion criteria

- Age < 18 years
- Previous injury with persistent functional impairment of the fracture site
- Non-operative treatment
- Complicated (open) fractures requiring a free flap
- Pathological fractures
- No understanding of the Dutch language

## Study design

### Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Active
Primary purpose:	Diagnostic

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	17-01-2023
Enrollment:	492
Type:	Actual

### Medical products/devices used

Generic name:	Virtual 3D planning
Registration:	Yes - CE intended use

## Ethics review

Approved WMO

Date: 20-10-2022

Application type: First submission

Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

Approved WMO

Date: 19-09-2024

Application type: Amendment

Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

## 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
CCMO	NL81122.042.22