The treatment of stable ankle fractures: Brace versus Cast immobilization

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This is study is to examine if a functional brace in the treatment of Unimalleolar Weber-B fracture results in a higher Olerud and Molander Score, less pain, better comfort, greater range of motion.

Positief advies
Werving gestart
-
Interventie onderzoek

Samenvatting

ID

NL-OMON23875

Bron NTR

Verkorte titel GiBra

Aandoening

ankle fractures, Weber B

Ondersteuning

Primaire sponsor: - Medical Center Haaglanden- Bronovo HospitalOverige ondersteuning: Medical Center Haaglanden

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Primary outcome is the Olerud & Molander Score at 6 weeks.

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Toelichting onderzoek

Achtergrond van het onderzoek

Ankle fractures are commonly seen on emergency departments of hospitals. They represent about 10% of all fractures and the incidence is expected to increase in the following years. n the case of an ankle fracture, the fibula (lateral malleolus) and/or the tibia (medial and/or posterior malleolus) can be injured. Furthermore, there can be ligament injury (mainly the syndesmosis between tibia and fibula en the deltoid ligament are of important value). The degree of osseous and/or ligament injury determines if the fracture is stable or unstable. In general, stable fractures are treated non-operatively (conservatively) and unstable fractures are treated operatively. The current treatment of stable ankle fractures in the Netherlands and most other Western European countries consist of 6 weeks cast immobilization: a belowthe-knee plaster cast for 1-2 weeks non-weight bearing, followed by a fiberglass short leg walking cast for the next 4-5 weeks, bearing weight within the limits of pain. Disadvantages of this treatment are that after cast immobilization some stiffness in the ankle joint may develop, atrophy of the calf muscle occurs and there might be an increased risk of developing osteoporosis. In some countries, including Switzerland, stable ankle fractures are often treated with a functional brace. Some previous studies indicate that this functional treatment prevents fracture dislocation as well as cast immobilization does, although it results in better clinical outcome and more comfort. A recent Cochrane Review (2009) described that there is limited evidence that the use of a removable type of immobilization and performing exercises during the immobilization period result in a better outcome. They also indicate that more clinical studies are necessary to support the current evidence. Future trials need to be adequately designed, outcome measures and endpoints need to be clear and they need to be adequately powered so that the results can be conclusive.

The aim of this study is to examine if a functional brace in the treatment of Unimalleolar Weber-B fracture results in a higher Olerud and Molander Score, less pain, better comfort, greater range of motion.

This stydt is a multicenter, prospective clinical trial in Medical Center Haaglanden (The Hague) and Bronovo Hospital (The Hague). All patients presenting at the emergency department with a stable ankle fracture will initially be treated with cast immobilization, the current treatment. Patients that meet the inclusion criteria will be informed about the study at the emergency department and they get an information letter. One week after visit to the emergency department there will be a check by the trauma-surgeon of the fracture by an ankle X-ray. If the fracture shows to be stable, they will be included in the study and randomization takes place under patients who are willing to participate in the trial. Group 1 will receive the current treatment with cast immobilization for a period of 5 weeks (non-weight bearing for 2 weeks and 3 weeks bearing weight within the limits of pain). Patients will be reviewed at 1 week, 3 weeks, 6 weeks, 12 weeks, 26 weeks and 52 weeks. After which both groups will be analyzed using SPSS version 20 or higher.

Doel van het onderzoek

This is study is to examine if a functional brace in the treatment of Unimalleolar Weber-B fracture results in a higher Olerud and Molander Score, less pain, better comfort, greater range of motion.

Onderzoeksopzet

1 week 3 weeks 6 weeks 12 weeks 26 weeks 1 year

Onderzoeksproduct en/of interventie

At 1 week post fracture the patient will return to the clinic. If he/she is willing to participate in the trial the randomization will take place. Group 1 consists of patients treated with cast immobilization for a period of 5 weeks. Group 2 consists of patients treated with a functional ankle brace for a period of 5 weeks. Week 1: Olerud & Molander Ankle Score Pain level using a Visual Analogue Scale Patient comfort using a Visual Analogue Scale Dislocation of the fracture using radiographs Eurogol-5D questionnaire Week 3: Olerud & Molander Ankle Score Pain level using a Visual Analogue Scale Patient comfort using a Visual Analogue Scale Dislocation of the fracture using radiographs Eurogol-5D guestionnaire Week 6: Olerud & Molander Ankle Score Pain level using a Visual Analogue Scale Patient comfort using a Visual Analogue Scale Range of Motion Dislocation of the fracture using radiographs Eurogol-5D questionnaire Week 12: Olerud & Molander Ankle Score Pain level using a Visual Analogue Scale Range of Motion Eurogol-5D guestionnaire Week 26: Olerud & Molander Ankle Score Pain level using a Visual Analogue Scale Range of motion Eurogol-5D guestionnaire AAOSscore Week 52: Olerud & Molander Ankle Score Pain level using a Visual Analogue Scale Range of motion Eurogol-5D questionnaire AAOS-score The presence of arthrosis using radiographs (Ankle Osteoarthritis Scale)

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients with a stable ankle fracture (type Weber B and less than 2 mm dislocation), between the age of 18 and 75 years old

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Multiple fractures
- Mental handicap
- Patients not living in the right region, i.e. follow up takes place in a different medical centre.
- Patients who do not speak Dutch fluently

Onderzoeksopzet

Opzet

Type:Interventie onderzoekOnderzoeksmodel:ParallelToewijzing:GerandomiseerdBlindering:Open / niet geblindeerdControle:Geneesmiddel

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-02-2013
Aantal proefpersonen:	100
Туре:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	
Soort:	

14-03-2014 Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 39792 Bron: ToetsingOnline Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL4323
NTR-old	NTR4469
ССМО	NL41177.098.12
OMON	NL-OMON39792

Resultaten