



AB143. 117. Fixing intracapsular fractures in a district general hospital, does the hip survive?

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Background: Following cannulated screw fixation for intracapsular neck of femur fractures the rate of avascular necrosis (AVN), non-union and conversion to arthroplasty is quoted at 4%, 6.4%, and 7.7%, respectively, in a recent systematic review. We aim to investigate whether cannulated screw treatment for intracapsular neck of femur fractures at a district general hospital (DGH) can meet the expected results from the specialist centres in the literature.

Methods: Retrospective data collection from January 2010 to June 2017. Clinical notes and radiographs examined of

all patients having undergone cannulated screw fixation for intracapsular proximal femur fractures at our DGH.

Results: Ninety-five patients identified. Mean follow up 44 months (range, 5–90 months). All patients treated with closed reduction and fixation with 3 or 4 cannulated 6.5 mm screws; AVN rate of 4.2%, non-union rate of 6.3% and conversion to arthroplasty rate of 7.3%.

Conclusions: Our local outcomes meet the accepted rates for non-union, AVN and conversion to arthroplasty. A further prospective study into patient reported outcomes during the 7.5-year follow-up period is warranted—ethical approval is currently being sought.

Keywords: Intracapsular; fracture; fixation; outcomes

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