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Assessing outcomes in patients with hip fractures under the age of 60

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Background: Hip fractures are a common and serious orthopaedic injury. The principles of treatment for hip fractures in the “non-elderly” patient is to preserve the native hip. There is limited published literature in this area. The aim of this research is to review all of the “non-elderly” hip fracture patients to report on the demographics, fracture patterns, fixation types and revisions.

Methods: This was a retrospective single-site review of all of the “non-elderly” patients who underwent operative management for hip fractures between 1999 and 2019. A manual review was done of all of the X-rays for the identified patients to confirm the fracture type and identify further surgeries.

Results: A total of 381 patients were identified. Their average age was 48.4 years old. Of all patients, 239 were intra-capsular and 142 were extra-capsular fractures. Dynamic hip screw (DHS) was the most popular fixation method. In the recent decade of data, the number of hemi-arthroplasties remained consistent but the number of total hip arthroplasties (THAs) performed increased sevenfold. The mean follow-up was 35 months. Forty-three (11%) patients required follow-up surgery. Non-union accounted for 56% of all revisions and avascular necrosis for 19%. THA was performed in 70% of all revisions.

Conclusions: DHS remains the most widely used fixation technique in an effort to preserve the native hip. The use of THA has increased and surpassed the usage of hemi-arthroplasty in recent times. A high proportion of these patients will go on to develop complications requiring secondary surgery, therefore they all need long-term follow-up.

Keywords: Avascular necrosis; hemi-arthroplasty; non-elderly hip fractures; non-union; revision rate

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Footnote

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