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## Ottava Giornata della Ricerca della Svizzera Italiana

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### Modulo per la sottomissione abstract di ricerca CLINICA

**Titolo** (massimo **15 parole**)

Anterior vs postero-lateral approach for hip hemiarthroplasty in femoral neck fractures: a prospective randomized study

**Autori** (cognome e iniziali, es: Grassi L.)

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**Testo** (massimo **250 parole**, preferibilmente in italiano (accettato anche in inglese), suddiviso in Introduzione, **Metodi, Risultati, Conclusioni e Finanziamento**)

Introduction

Femoral neck fractures are a major problem in the orthopaedic practice, involving elderly patients; in this population, early recovery is paramount. Thus, aim of this study is to compare two surgical approaches, direct anterior (DA-group) or postero-lateral (PL-group), used for bipolar hip hemiarthroplasty (BHA). Our hypothesis was that the pain early recovery would be faster in the DA-group.

Methods

One hundred patients aged 75 years or older were randomized to surgery using either a DA-group or PL-group approach, and were then followed up for 6 months. Surgical time, intra and postoperative complications were recorded for each patient. The main outcome, pain, was recorded with a NRS scale at 3 days, 1, 3 and 6 months after surgery. At the same surgical time, patient status was also evaluated with ADL and CAS scales.

Results

Surgical time was slightly longer in the DA-group ( $p < 0.0001$ ). There was no difference in both local and systemic complications among the two groups. Pain perception at 3 days and at 1 month after surgery was significantly lower in DA-group patients ( $p < 0.0001$ ). The results of the other scales were comparable in the two groups (at 3 days, 1 and 3 months after surgery).

Conclusions

The DA approach offers a significant advantage in terms of pain perception up to 1 month after the operation. While the surgical time was slightly higher in the DA approach, no higher complications were found. Therefore, the DA approach seems to be a valid surgical option for such patients with femoral neck fractures.

**Visto superiore** (prego indicare Nome e Cognome del superiore)

Christian Candrian

**Criteria per sottomissione Abstract:**  
NO Case report  
NO Abstract senza nessun risultato  
VISTO da un superiore

**Invio Abstract**

