
**COMPARISON OF FUNCTIONAL AND RADIOLOGICAL
OUTCOMES BETWEEN OPEN REDUCTION AND CLOSED
REDUCTION OF SUBTROCHANTERIC FRACTURES OF
FEMUR**

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ABSTRACT

AIMS AND OBJECTIVE: - Subtrochanteric fractures of the femur present a challenge for the treating surgeon, as the deforming forces on both the proximal and distal segments are difficult to control, leading to great difficulties in close reduction under traction. Sometimes open reduction through a small incision at the fracture site is inevitable for anatomical reduction. Hence in our study we are comparing the outcomes of open vs closed reduction of subtrochanteric fractures

TYPE OF STUDY: - Prospective study

MATERIALS AND METHODS: -This study is a hospital based study during the period from January 2021 to January 2022 Patients who are diagnosed with subtrochanteric femur fractures and who underwent operative intervention either closed or open reduction internal fixation with PFNA2 after fulfilling the inclusion criteria. Post-operative evaluation of functional and radiological outcome of open and closed reduction technique using the Harris Hip Score and RUST score respectively were done and compared.

RESULTS: - Total 30 cases which satisfied inclusion criteria were taken, 2 lost the follow up and 6 expired, so total 22 patients were followed up. 15 Males and 7 Females, They were classified according to Scinschemiers classification, maximum patients were Type3A- 7 patients, followed by type4 and type 5 - 4 patients each, rest were other types. Out of total, 12 patients underwent open reduction and 10 patients underwent closed reduction. Functional outcome of patients assessed on the basis of Harris hip score at the end of 1year were n= 13 had excellent outcome , n= 5 had good outcome, n= 3 had fair, n= 1 had poor outcome (p=0.01). 2 patients had complication of blade cut through, 2 patients had wound dehiscence and re explored. Radiological fracture union assessed using RUST score at the end of 1year in total 17 Showed union and 5 showed Non union.

CONCLUSION: - Functionally and radiologically no difference between open and closed reduction technique after 1year, but early union of fractures seen in closed reduction cases, functionally no difference found in either techniques at any time of follow up.