There is no association between infection rates and time to operative debridement of open fractures, according to research published in the June 20 issue of *The Journal of Bone & Joint Surgery*.

Mara L. Schenker, M.D., of the University of Pennsylvania in Philadelphia, and associates conducted a systematic literature review to evaluate the association between time to operative debridement of open fractures and infection. A meta-analysis was performed on 16 studies (six prospective and 10 retrospective cohort studies) that included 3,539 open fractures.

The researchers found that there were no significant differences in
infection rates between early and late debridement. No difference was seen in infection rates between early and late debridement based on subgroups defined by level of evidence, depth of infection, anatomic location, or according to Gustilo-Anderson classification.

"The data did not indicate an association between delayed debridement and higher infection rates when all infections were considered, when only deep infections were considered, or when only more severe open fracture injuries were considered," the authors write. "On the basis of this analysis, the historical 'six-hour rule' has little support in the available literature. It is important to realize that additional carefully conducted studies are needed and that elective delay of treatment of patients with open fractures is not recommended."

One or more of the authors or their institution disclosed financial ties to an entity in the biomedical arena.

More information: Abstract
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Editorial

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