

Surgery to repair severe heel fractures ?ineffective?

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(Medical Xpress)—Commonly-performed surgery to mend severe heel fractures is no more effective than non-surgical treatment, according to the results of an Arthritis Research UK-funded clinical trial.

Publishing their findings in the *British Medical Journal*, researchers at Warwick Medical School found that <u>surgery</u> also led to painful and expensive complications, with 19 per cent of people who had surgery on their damaged heel joint developing an infection, and a further 11 per cent needing further surgery to remove infected or painful screws.

Severe heel injuries are suffered by about 2,000 people in the UK every year due to crushing and fracturing usually as a result of road accidents or falling off ladders. In the worst cases the injury leads to arthritis and a painful, deformed foot, and many have to walk with a walking stick and are unable to wear normal shoes. Some people never work again.

The trial, sponsored by the University of Warwick and the University Hospitals Coventry and Warwickshire NHS Trust, was one of the largest such randomised trials ever performed in <u>orthopaedic surgery</u>, and involved 22 hospitals around the UK.

Study leader Damian Griffin, professor of trauma and orthopaedic surgery at Warwick Medical School said: "This study is likely to have a significant impact in the UK and around the world.

"For a clinical problem that has been beset by uncertainty for half a



century, we believe that this study now provides clear evidence to guide practice. Future developments in surgical techniques to treat these fractures should be tested in <u>randomised controlled trials</u> before they are widely used."

The randomised controlled trial, which involved 150 patients who suffered a severe heel fracture, was conducted because of a longstanding lack of evidence as to whether surgical reconstruction was more effective than so-called conservative management of elevation, applying ice, and splinting.

Participants in both surgical and non-surgical treatment arms of the study recovered slowly, regardless of their treatment and reached a plateau of improvement at about 18 moths. After two years most were still adversely affected by their injury. About 85 per cent returned to work, although most changed to less physically demanding work, with no difference between the groups.

Writing in an accompanying editorial, Brigitte Scammell, professor of orthopaedic sciences at the University of Nottingham, added: "For most patients, surgery can no longer be justified. Conservative management is safer, but equally ineffective."

Provided by University of Warwick

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