P016-e
A comparison of short and medium term clinical and isokinetik outcomes of three surgical processes of ACL reconstruction
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Introduction.—Three surgical processes of anterior cruciate ligament (ACL) reconstruction are being compared. Two of them are involving a tendinous transplant of the hamstring: semi tendinosus/gracilis (ST-G) and semi tendinosus alone (ST-TLS). The latter is using a Facia Lata strip (MacFL). Our goal is to find differences in the clinical and paraclinical outcomes that could have an influence on the rehabilitation.

Material and methods.—Included patients benefited from a clinical and isokinetik evaluation in the service between December 2009 and March 2012. Exclusion criteria: past history of ACL lesion of the controlateral knee (already performed on or not), ACL reconstruction on the same joint for the ST-G and the ST-TLS. They benefited from rehabilitation in a daytime hospital for 30 to 45 days, three to five times a week, then through private practices. They have been re-examined one to three times between 3 and 21 months after their surgery. The clinical evolution was based on a subjective evaluation (IKDC score) and a standardized examination. The muscular evaluation was made on an isokinetik dynamometer.

Results.—One hundred and eighteen patients were included, and among them 40 ST-G, 40 ST-TLS and 38 MacFL. The first evaluation (at around 5.4 months) shows the IKDC scores were of 71.25% (ST-G), 72.28% (ST-TLS) and 67.7% (MacFL). At low speed, the extensor muscles strength deficits were: 12.86% (ST-G), 16.17% (ST-TLS) and 22.65% (MacFL). The flexor muscles strength deficits were: 6.78% (ST-G), 8.52% (ST-TLS) and 2.1% (MacFL).

The third evaluation (at around 14 months) shows the IKDC scores were of 77.25% (ST-G), 87.83% (ST-TLS) and 84% (MacFL). At low speed, the extensor muscles strength deficits were: 12.86% (ST-G), 16.17% (ST-TLS) and 22.65% (MacFL). The flexor muscles strength deficits were 6.78% (ST-G), 8.52% (ST-TLS) and 2.1% (MacFL).

Discussion/Conclusion.—These preliminary results do not show evidence of major differences on the IKDC score. The isokinetik results seem to indicate the deficit is superior on the extensor muscles among the ST-G and the flexor muscles among the ST-TLS.

http://dx.doi.org/10.1016/j.rehab.2012.07.202

P018-e
Disability and quality of life after total hip prosthesis: 78 cases from the PRM unit of the Casablanca University Hospital
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Keywords: Total hip prosthesis; Disability; Quality of life

Introduction.—Our objective was to determine disability and quality of life in patients after placement of a total hip prosthesis.

Patients and method.—This was a prospective study of patients followed in our department from January 2004 to December 2011 for a total prosthesis implanted for severe inflammatory or degenerative hip disease. The evaluation, performed preoperatively, at 6 weeks and the third postoperative month, included an assessment of pain (VAS), function using the Postel-Merle d’Aubigné (PMA) index and the WOMAC quality of life by the scale.

Results.—There are 43 women and 35 men, mean age 43 years (20–75 years). The average VAS pain score improved from 87 ± 23 to 25 ± 14 (P < 0.005). The PRM rose from 7.4 ± 4 to 15.7 ± 4.5. The WOMAC score was significantly improved. This improvement appeared to be well correlated with pain reduction and improvement in the PMA score.

Discussion/Conclusion.—Our results confirm the decrease in hip disability after total hip replacement with a positive impact on patients’ quality of life.

Further reading

http://dx.doi.org/10.1016/j.rehab.2012.07.204

P017-e
Epidemiological profile of isolated injuries of the hand extensor tendons
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Keywords: Extensor tendons; Hand; Rehabilitation; Epidemiology

Objective.—To determine the epidemiological profile of isolated injuries of the hand extensor tendons in patients consulting a physical medicine and functional rehabilitation unit in Tunisia.

Materials and methods.—Twenty patients underwent postoperative rehabilitation after isolated injury of the hand extensor tendons between 2010 and 2011. We collected demographic, socioeconomic and anatomic-clinical parameters.

Results.—Average age of our patients was 42 years. Eighty percent are male and are all manual workers. Ninety percent are right-handed. This was work-related accident in 65% of cases. Seventeen of 20 patients have insurance coverage. Injuries of the extensor tendons interested the dominant hand in 75% of cases. They were located in zone 3 in 50% of patients and in zone 5 in 20%. Surgery latency was between 1 and 4 days. Rehabilitation care began at the 6th week after surgery. The most common complication was extensor tendons adherence (50% of cases). 40% of patients underwent secondary surgery (tenolysis). 62% of patients had not recovered their initial workstation.

Discussion.—Hand extensor tendons, poorly protected by the dorsal skin, are particularly vulnerable to wounds. These tendons injuries are mostly secondary to work-related accidents and interest mainly dominant hand of male manual workers. Their rehabilitation care is usually started at the 6th week postoperatively. They are a frequent cause of work disability.

http://dx.doi.org/10.1016/j.rehab.2012.07.203