Results.—Between December, 2011 and September, 2013, 5 men and 5 women, 40-year-old on average (21–50) benefited from an intervention for a PMS (10 sciatic nerve neurolysis and 4 perifemoral tenotomies). After an average follow-up of 7 months (1–10), none brought back painful recurrence and 4 had resumed sports activity.

Conclusion.—The TBX test, by confirming the diagnosis of SMP, contributes to the good result of the surgical treatment at all the patients of this open series.

Reference


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P109-e

Replacement of the fractured radial head – a case study

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Introduction.—Fractures of the radial head may be isolated or associated with more complex injuries such as fractures and dislocations around the elbow and rupture of the distal radioulnar joint. As the severity of the injury increases, the controversial question of prosthetic replacement arises.

Observation.—We present a case report of a Mason IV radial head fracture, associated with posterior luxation of the elbow and fracture of the coronoid process in a 65-year-old female, submitted to a radial head replacement with a metallic prosthesis and a reconstruction of the coronoid process, followed by a rehabilitation program.

Discussion.—There is no consensus about the treatment of an unstable elbow injury associated with fracture of the radial head. The options include excision, reconstruction and replacement.

The replacement of the radial head seems to be a good treatment for Mason type IV fracture associated with fractures of the proximal ulna or elbow dislocation.

Further reading


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P110-e

Total ankle replacement: Clinical and functional assessment by AFCP score at 8 weeks postoperative

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Keywords: Total ankle replacement; Ankle arthritis

Background.—The management of disabling arthritis of the ankle is a challenge. There is a resurgence of interest in total ankle replacement (TAR). Unlike arthrodesis it aims to restore mobility, stability, indolence, preserving the adjacent joints. The objective of this work is to evaluate the overall functional outcome after TAR.

Methods.—Cases serie, from 15th november to 15 may 2013, Rehabilitation Center “Le Castelet” Saint-Jean-de-Vedas, France. Primary purpose: after 8 weeks postoperative the functional score AFCP was evaluated.

Results.—Eighteen included (n = 18). Median age 59.5 y.o, 13 men, 5 women. BMI 25. Etiology: post-traumatic 50%, laxity 22%. Associated procedures 44%, (4 Achilles lengthening, 3 lateral ligament reconstructions, 3 osteotomies). Main outcome: 18.3 point (36%) improvement in the AFCP score was noted.

Discussion.—Functional improvement 8 weeks postoperative, age and sex have no influence on the results. Overweight is a pejorative factor. AFCP et al. (2006) reported a score of 82/100 at an average follow-up of 3 years. Easley systematic review in 2011 reported 90% implants survival rate at an average of 10 years, with an acceptable complication and revision rate.

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P111-e

Efficacy of a platelet-rich plasma treatment in subjects with plantar fasciosis

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Keywords: Plantar fasciitis (fasciosis); PRP; Ultrasonography; Clinical outcomes.

Objectives.—To determine the effect of aplatelet-rich plasma (PRP) treatment applied in patients with plantar fasciosis through clinical and quantitative ultrasound measurement, conducted after treatment intervention and during a follow-up period.

Methods.—A prospective observational study was conducted in patients diagnosed of PF, treated with PRP ultrasonography guided injection, with a 2-week, 4-week and 3-month follow-up. Eighteen patients with clinical diagnosis of plantar fasciosis who met inclusion criteria.

Results.—A decrease of 1.64 ± 1.01 mm (P-value = 0.000) in the plantar fascia sagittal thickness was quantified at 2-weeks follow-up, a decrease of 2.01 ± 1.10 mm, (P-value = 0.000) was quantified at 4-weeks, and a decrease of 2.20 ± 1.02 mm, (P-value = 0.000) was quantified a 3-months follow-up. All plantar fascia mean reductions were lower than the Limits of Agreement for plantar fascia ultrasonography for repeated measures. Pain at first steps in the morning was reduced in 4.02 ± 1.94 mm at 2-weeks (P-value = 0.000), 6 ± 2.54 mm at 4-weeks (P-value = 0.000) and 7.13 ± 2.37 mm at 3-months (P-value = 0.000) follow-up. Pain on return to weight-bearing following rest was reduced in 3.66 ± 2.32 mm at 2-weeks (P-value = 0.000), 4.94 ± 2.09 mm at 4-weeks (P-value = 0.000) and 6.30 ± 2.34 mm at 3-months (P-value = 0.000) follow-up.

Conclusion.—Preliminary results suggest that PRP is a safe and effective therapeutic approach to reduce plantar fascia sagittal thickness following the L.O.A. for repeated measurements in patients with PF, correlated with an improvement of pain.

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P112-e

Significance of laser therapy and laser acupuncture in epicondylitis treatment

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Keywords: Epicondylitis; Laser therapy; Laser acupuncture

Introduction.—Epicondylitis is an inflammation of the attachment (enthesis) muscles of the forearm to the outer or inner epicondyle of the humerus.

Object.—The purpose of the study is to compare therapy with laser application on painful areas of the affected ankles with laser application on acupunctural points on pain relief and ankle flexion amplitude in patients with epicondylitis.