

Morbidity of Pertrochanteric Fracture in Elderly Patients

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ABSTRACT

Pertrochanteric fractures are a major cause of morbidity and mortality in the elderly. Their care must be early and multi disciplinary to allow patients to recover the pre-fracture autonomy in the shortest possible time. The complications of these fractures are frequent and potentially fatal. They must be sought and prevented. The loss of autonomy is the main risk of the fall. The age of the patient and the autonomy before the fracture are the two main elements that determine the risk of complications. The occurrence of complications causes a great deviation of the functional prognosis of the patient. Preoperative complications have a worse prognosis than postoperative complications. In our series it was noted that only 1/7 of patients with a preoperative complication and only 1/4 of patients with a postoperative complication had good walking autonomy after 1 year. The delay in surgical management predicts both the vital and functional prognosis. In our series 48% of patients operated before 7 days had good results against only 28% of patients operated after 7 days. Pressure ulcers are the most formidable complications. At 1 year, 49% of patients who did not have preoperative pressure ulcers had good walking independence compared to only 14% of patients with preoperative pressure ulcers. The mortality at one year was 56% in patients who had pressure sores preoperatively (including 3 who died before being operated on) and 46% in patients who had pressure ulcers postoperatively compared with only 14% of deaths in patients who did not have this complication.