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<b>Author(s)</b> Sylvia Resch	<b>Sponsoring organization</b>	
<b>Title and subtitle</b> Hallux valgus surgery		
<p>The aim of the thesis was to compare two first metatarsal osteotomies, chevron and proximal, with respect to clinical satisfaction, complications such as transfer metatarsalgia and avascular necrosis and radiological correction, and to see if the addition of a soft tissue procedure, an adductor tenotomy, improved the results. In addition, clinical and radiographic methods of measurement, as well as roentgen stereophotogrammetry, scintigraphy and dynamic plantar pressure registration have been evaluated. The final aim was to present a reliable procedure to the patient which will permanently correct her deformity without complications and will give clinical satisfaction.</p> <p>The radiographic changes obtained did not correlate well to the clinical outcome of the osteotomies. Trigonometric calculations predicted greater angular changes than were actually found. The ball circumference was found to correlate to dissatisfaction with the clinical outcome. In order to evaluate circulatory disturbance, <sup>99m</sup>Tc-MDP scintigraphy was used. It was found that radiography was neither correlated to satisfaction with outcome, nor reliable in diagnosis of circulatory disturbance.</p> <p>Roentgen stereophotogrammetry was used to study radiographic changes on weight bearing and after osteotomy, showing that changes are complex and occur at many levels, including rotational changes. Dynamic plantar pressure registration with the Fscan system showed a pathological pressure pattern in hallux valgus feet not improved by operation.</p> <p>Measurement accuracy was investigated by inter and intraobserver studies of standard radiographic and clinical measurements, showing that linear measurements are more accurate than angular measurements, and may be preferable for evaluating surgery.</p> <p>Thus chevron osteotomy is a procedure which gives satisfactory and lasting results best evaluated by simple clinical measurements such as the ball circumference. Since metatarsalgia is a frequent complication to proximal osteotomy, it should be reserved for situations where chevron osteotomy has failed to give satisfactory results. Our methods of measurement are not always as accurate as previously assumed and leave room for improvement.</p>		
<b>Key words</b> Hallux valgus, chevron, osteotomy, scintigraphy, Fscan, plantar pressure, RSA, measurement accuracy, avascular necrosis		
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## GÖR DET MERA ONT ATT HA DISKBRÅCK ÄN ATT HA RYGGSKOTT?

Karin Frennered, Malin Lindh, leg sjukgymnast, med dr Ingalill Lindström, Tomas Rohdin, Rygghälsan, Göteborgs Sjukvård, Göteborg

**Bakgrund:** Smärtintensitet och funktionsnivå är variabler av betydelse vid bedömning och handläggning av patienter med ryggbesvär. Syftet med denna utvärdering var att ta reda på om det fanns någon skillnad mellan patienter med ländryggsbesvär med och utan verifierbar specifik röntgenologisk genes, vad gäller olika bakgrunds- och rehabiliteringsvariabler, rehabiliteringstid och utfall.

**Metod:** Bland 685 patienter med en medelålder på 40 år, hade 335 besvär från ländrygg och/eller ben. Alla deltog i yrkesinriktad rehabilitering på Rygghälsan, Göteborgs sjukvård. Hos 35 % av dessa kunde en specifik orsak som diskbråck, spinal stenos, spondylolistes, kotfraktur, osteoporos eller inflammatorisk sjukdom verifieras som genes till besvären. Bakgrundsfaktorer och upplevd grad av smärta, hälsouppfattning, funktionsförmåga och arbetstyngd registrerades liksom rehabiliteringstidens längd och arbetsförmåga vid utskrivning.

**Resultat:** De patienter där en specifik diagnos kunde verifieras var 4 år äldre och hade längre rehabiliteringstid trots avsaknad av andra rehabiliteringshinder jämfört med gruppen utan verifierbar specifik genes till besvären. Det fanns ingen signifikant skillnad i kön, medborgarskap, upplevd smärtintensitet, hälsouppfattning eller funktionsförmåga och arbetstyngd. Ej heller fanns någon signifikant skillnad i grad av arbetsförmåga vid utskrivning.

**Slutsats:** I denna grupp av patienter med ländryggsbesvär rapporterades genomsnittlig smärtintensitet på samma nivå oavsett genes till besvären. Längre rehabiliteringstid krävdes för dem där en radiologisk specifik genes kunde verifieras.

**Abstract**

**Psychosocial characteristics in patients with recurrent injuries.**

Sari Ponzer, MD. (1), Bo Bergman, MD., Ph.D. (2), Bo Brismar, MD., Ph.D. (3), Leena Maria Johansson, MD. (2)

The aim of this study was to analyze and describe psychosocial background factors in patients with recurrent injuries.

**Design:** Prospective clinical study.

**Setting:** Patients hospitalized because of orthopedic or surgical trauma.

**Participants:** Three hundred and forty-five patients categorized in two groups; the Repeated Trauma group (RT; n=120) and the Single Trauma group (ST; n= 225).

**Interventions:** The patients answered a standardized questionnaire. ISS and AIS were calculated.

**Results:** Patients in the RT group had a lower level of education and being unemployed or on the sick-list was more common than among the patients in the ST-group. Fifteen per cent of the RT patients had experienced violence in their family of origin compared to 6% in the ST group. Thirty per cent of the RT patients had been victims of assault or battery compared to 6 % of the ST patients and 25 % of the former had a history of alcohol abuse compared to 5% of the latter.

**Conclusion:** Patients with repeated trauma episodes have a less favorable psychosocial situation including a high alcohol consumption. This constitutes a life-style predisposing them to injuries. Our findings indicate that a psychosocial intervention program after a trauma episode may be highly cost-effective if patients with psychosocial problems and who are still in an early stage of a "chronic trauma syndrome" were identified and supported in changing their life-style. Prospective longitudinal studies should be made to define effects of such secondary preventive measures.