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陈少贞, 张 涛, 朱庆棠, 李 平, 向剑平, 张 毅, 顾立强. 两种不同外固定方式对新鲜锤状指临床疗效的单盲随机对照研究[J]. 中国康复医学杂志, 2012, (11): 1006~1010

两种不同外固定方式对新鲜锤状指临床疗效的单盲随机对照研究 点此下载全文

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摘要.

摘要目的: 比较两种不同的外固定方式对新鲜锤状指的临床治疗效果及其对日常生活和工作的影响程度,探讨和寻求新鲜锤状指较佳的保守治疗方法。方法: 新鲜锤状指40例,包括 腱性27例和骨折块小于关节面1/3的患者13例,被随机分为两组,观察组采用远端指间关节过伸15°—20°固定,对照组采用近端指间关节屈曲位远端指间关节过伸位固定。持续固定6周, 第6周后开始手功能训练,夜间仍用支具固定到第8周。第6周、第12周时测量远端指间关节欠伸度、伤指总主动活动度、疼痛程度,并用自制调查表调查固定期间日常生活受影响的情况。 结果: 经过治疗两组患者均有明显改善(P<0.05)。但两次复查中,观察组远端指间关节欠伸度、远端指间关节主动屈曲度、伤指总主动活动度TAM、疼痛目测模拟评分法(VAS)得分均优 于对照组(P<0.05)。两组患者在第12周随访时上述测量指标均优于第6周时(P<0.05)。外固定使用期间,观察组日常生活活动受影响的程度较对照组轻,皮肤问题也较少发生。结论: 不管 是腱性还是未超关节面1/3的骨性新鲜锤状指采用外固定等保守治疗是可靠的,仅固定远端指间关节于过伸位比双指间关节固定有更好的疗效和更佳的舒适度。6周的固定时间基本能达到固 定要求,如果仍存在一定欠伸度,适当延长固定时间到8周仍可以得到改善。

关键词: 锤状指 肌腱损伤 支具

Single-blind randomized controlled research on clinical values of two kinds of splint in fresh mallet finger Download Fulltext

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Fund Project:

Abstract:

Abstract Objective: To evaluate and compare the clinical outcomes of two different kinds of thermoplastic splints for treatment of fresh mallet finger. Method: Forty patients with fresh mallet finger were recruited in this research, and distributed to two groups in random process. The 20 patients in control group were immobilized by hand-made splints in distal interphalangeal (DIP) hyperextension and proximal interphalangeal (PIP) flexion, but the patients in treatment group in DIP hyperextension only. After 6-week continuous splinting, all patients were encouraged to do hand function training, night splints were used for an additional period of 2 weeks. Extensor lag were measured pre-treatment, 6 and 12 weeks post-treatment. Range of motion(ROM) of DIP, visual analogue scale(VAS) and total activity movement(TAM) were measured of 6 and 12 weeks post-treatment. Result: The average extensor lag decreased and the average ROM of DIP, TAM increased in both groups, the effects of treatment group was better than that of control group. In the period of treatment, the patients of treatment group had less pain than those of control group. Conclusion: Splinting is a practicable, safe and simple method of treatment for fresh mallet finger, and immobilization is suggested to be only used in DIP joint hyperextension.

Keywords:mallet finger tendon injuries splint

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