首页 | 杂志介绍 | 编委成员 | 投稿指南 | 订阅指南 | 过刊浏览 | 广告投放 | 论著模板 | 综述模板 | 帮助

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老年骨质疏松性股骨粗隆间骨折围手术期运动疗法干预研究 点此下载全文

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摘要:

目的:探讨围手术期运动疗法干预对老年骨质疏松性股骨粗隆问骨折的预后及患者骨密度的影响。方法:选择老年骨质疏松性股骨粗隆间骨折60例,随机分为运动疗法组(30例)和对照组(30例)。两组均给予抗骨质疏松药物治疗。运动疗法组患者,在围手术期分三个阶段给予自编运动体疗操训练治疗。比较两组手术后并发症的发生率、术前与术后个月股骨上段Singh指数、股骨颈、Ward三角、大转子骨密度的变化及改良Barthel指数评分。结果:运动疗法组术后近期及远期均无并发症发生。26例术后6个月髋部X线片Singh指数较术前增加1度。术后6个月股骨颈、Ward三角、大转子骨密度检查较术前均有不同程度的上升,差异有显著性意义(P(0.05)。对照组术后有5例发生骨吸收骨折再移位并发症。21例术后6个月髋部X线片显示股骨上段Singh指数较术前减少1度。术前与术后6个月股骨颈、Ward三角、大转子骨密度检查结果比较差异无显著性意义(P)0.05)。改良Barthel指数评分显示:运动疗法组与对照组术前比较差异无显著性意义(P)0.05)。求后6个月时运动疗法组优于对照组,差异有显著性意义(P)0.05)。结论:老年骨质疏松性股骨粗隆间骨折,在围手术期给予运动疗法干预除可以有效预防废用性骨质疏松症。促进骨折修复及增加骨量外,患者还能够获得更高的生活活动自理能力。

关键词: 老年 骨质疏松 骨折 运动疗法

The study of perioperative kinesiotherapy effect on senile osteoporosis intertrochanteric fracture patients  $\underline{ \text{Download Fulltext} }$ 

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Abstract:

Objective: To investigate the perioperative kinesiotherapy effect on the prognosis of senile osteoporotic intertrochanteric fracture patients. Method: Sixty old patients with osteoporotic intertrochanteric fracture were divided into kinesiotherapy group and control group. Anti-osteoporosis drugs were given to both groups, patients in kinesio therapy group all received self-designed gym exercises during three stages of perioperative period. These indexes compared between two groups before and 6 months after operation were as following:incidence of complication, singh index of femoral upper part, bone density of femoral neck, Ward triangle and major trochanter, modified Barthel index(MBI). Result:In kinesiotherapy group, all patients didn't occur any complication in the short and long stage after operation. Compared to that before operation, post operation 6 months singh index of 26 patients' hip X-ray increased one grade, and the bone density of femoral neck, Ward triangle and major trochanter increased significantly(P<0.05). In control group, 5 patients happened bone absorption and fracture shift. Compared to that before operation, post operation 6 months singh index of 21 patients' hip X-ray decreased one grade, and the bone density of femoral neck, Ward triangle and major trochanter hadn't significantly change(P>0.05). The two groups' MBI before operation had no significant difference(P>0.05), but MBI of kinesiotherapy group after six months was significantly higher than control group(P<0.05). Conclusion: For the senile osteoporotic intertrochanteric fracture patients, perioperative kinesiotherapy intervention can effectively prevent disuse osteoporosis, and facilitate the recovery of fracture, increase the quality of bone and improve the patients' ADL.

Keywords: the senile osteoporosis fracture kinesiotherapy

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