Ankle Injury Follow Up

The Ankle Injury Management (AIM) study has completed three year follow up and published a letter in JAMA. Thank you to all the patients and staff who worked so hard for this study.

Staff were concerned some people may have symptoms of post traumatic arthritis that show up later on during recovery. Therefore funding was obtained for a three year follow up of participants who took part in the main study.

The response from participants was very good with 73% providing further data. The findings show that participants’ ability to function was maintained in both casting and surgical groups. There were no differences in participants’ quality of life or pain scores.

The letter is open access if you wish to read more.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5885844/

Contact: David Keene

Open Fractures UK WOLLF

The UK WOLLF trial was a randomised control trial of standard wound management versus negative pressure (vacuum) wound therapy for the treatment of adult patients with an open fracture of the lower limb. The vacuum wound therapy applies a gentle suction and removes fluid from the wound. An open fracture is one where the bone is exposed through the skin and there is a higher risk of infection than in a fracture where the skin is not broken.

Patients with an open fracture need to have their wounds cleaned under surgical conditions. If the surgeon was unable to close the wound during this operation then the patient was considered for the trial.

460 patients were randomised into the study in 24 hospital sites in the UK. Patients who were too traumatised to provide informed consent could take part if a consultee advised the team that they would not object to taking part. The patient, when well enough, consented to continue in the study or withdraw from the study.

The findings show that there was no difference between the two groups in relation to the Disability Rating Index (a measure of function), or infection rates or health related quality of life at 12 months.


Contact: Matt Costa
Patient Experience

Two papers from the UK WOLLF study (see page 1) have focused on patient experience. The first identified patient experience of what it was like to be injured.

This paper highlights the strong emotions felt by patients as they relive the event and struggle to process the impact of injury. They had a heightened awareness of the affect on their family and their future life. They were very grateful for being saved by the team and often needed to talk about their injury and treatment in order to make sense of it.

The participants were shocked by the extent of their injury and wounds. Many needed help to look at their wounds and worried about the long term impact on their life. Covering the wound up whilst in hospital was important for some. Participants also talked about their experience of pain in vivid and varied ways. When ready they wished to talk through how they would manage at home but were sad about the things they would not be able to achieve.

**Tutton E, Achten J, Lamb SE, Willett K, Costa M, on behalf of the UK WOLLF research collaborators.** A qualitative study of the experience of an open fracture of the lower limb in acute care, Bone Joint J 2018;100-B:522-6

The second paper focused on patient experience of taking part in the trial.

Patients identified that in general they did not mind taking part in this trial as it was a minor part of their overall care. Altruism or giving something back was important to them and the study was not demanding of their time. The clinical team were important and participants invested hope in their knowledge and skill. It was hard for them to separate taking part in research from daily clinical care. It was also difficult for them to make sense of the interventions without having had prior experience of them. Those that had the vacuum dressing liked it and felt it supported their recovery.

**Tutton E, Achten J, Lamb SE, Willett K, Costa M, on behalf of the UK WOLLF research collaborators.** A qualitative study of the experience of an open fracture of the lower limb in acute care, Bone Joint J 2018;100-B:522-6

**Contact: Liz Tutton**

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**WHiTE8 - World Hip Trauma Evaluation eight.**

This is a randomised controlled trial comparing two types of cement to fix metal work after a break in the hip. One is cement including one low dose antibiotic, the other is cement including two high dose antibiotics.

Patients may be included if they are over 60 years old and have a fracture across the neck of their hip where the bones are not in alignment (displaced intracapsular hip fracture) and require a partial hip replacement, this is called a hemiarthroplasty.

The national recruitment target for this trial is 4,920 participants. The trial will run at 20 sites or more over 2.5 years. At the John Radcliffe we will be including patients both with and those without capacity. Those without capacity will be included if they have a consultee who will advise the study team.

Patients who are allergic to antibiotics such as gentamicin and clindamycin and/or require non surgical management will not be eligible for this trial.

The primary outcome measure of the trial is to determine the rate of deep infection after 90 days post-surgery.

The trial sponsor is Northumbria Healthcare NHS foundation Trust and the Chief investigators are Professor Mike Reed and Professor Matt Costa.

At the John Radcliffe our Trauma Consultant Mr. Graham Sleat is the Principal Investigator and we anticipate starting recruitment in October.

**Contact Maria Mestre**
**WHITE MoHIP**

**WHITE MoHIP Sub-study**  
The World Hip Trauma Evaluation – Monitoring of HIP patients sub-study.

This observational, feasibility study aims to monitor activity levels in patients with capacity who have undergone an operation for a hip fracture. The study aims to recruit patients and monitor their activity for four months, following their operation. The primary outcome of the study is to determine the feasibility, utility and acceptability of wearing the monitor, determined by patient feedback and qualitative interviews.

The aim is to recruit 100 patients, with recruitment finishing once the target has been reached. The study is led by Professor Andrew Farmer and Dr Laura Armitage and more information is available from the research team.

The monitor is a bit bigger than a 2 pence piece and is worn on a lanyard around the neck.

**Contact:** Zoey Warnock

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**Fragility Fracture Network**

This photo was taken at the Fragility Fracture Network (FFN) Congress in Dublin. The picture shows from left to right: Conor Hurson, Louise Bent and Emer Ahern (the local Organising Committee for Dublin), Paolo Falaschi (Past President of the FFN) and Matthew Costa (President of the FFN). We are hosting the 2019 Congress in Oxford. This will take place in the Examinations Hall, Oxford University from the 28-30 August 2019. Abstracts can be submitted on the 9th April 2019 and Registration starts on the 19th June 2019. For further details see:

- [http://fragilityfracturenetwork.org/project/congress-information/](http://fragilityfracturenetwork.org/project/congress-information/)

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**Study Updates**

Congratulations to Path-2 who have presented their study findings in Rio and at the British Orthopaedic Association Congress. Also to UKSTAR and SCI POEM who have finished recruitment. Many new studies have started:

- **PROFHER-2:** Assessing two surgical treatments or a conservative treatment in older adults with a fracture at the top of their arm (proximal humerus). Treatment of this fracture requires specialist skills.
- **ACEFiT:** Assessing three different treatments for fractures of the hip socket in older people. This study is recruiting but patients are often very frail.
- **ACTIVE:** Assessing two treatments, metal plate or circular frame for a break across the bottom end of the shin bone. This study is recruiting but this type of fracture is rare.
- **AFTER:** Assessing intensive physiotherapy versus normal care after ankle fracture. This study will start in October.

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**Forthcoming Meetings**

- **Injuries and Emergencies Speciality Group (IESG)**  
  Thames Valley and South Midlands Clinical Research Network (TVCRN) Chair: Andrew McAndrew.  
  **Next meeting:** 30th November at Royal Berkshire Hospital,

- **Lead Research Nurse Forum**  
  **Next meeting:** 29th Nov, 14.00 at The Nuffield Orthopaedic Centre.

- **7th NIHR Musculoskeletal Trial day.** 9th January 2019, Burton on Trent.
  **Contact:** Kathryn Lewis


