

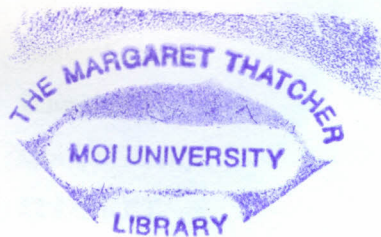
TREATMENT OUTCOME OF ANKLE INJURIES AT THE MOI TEACHING
AND REFERRAL HOSPITAL, ELDORET, KENYA

BY

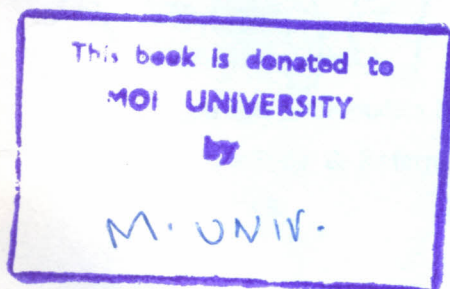
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REQUIREMENT FOR AWARD OF DEGREE OF MASTER OF MEDICINE
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ABSTRACT

Title: Treatment outcome of ankle injuries at the Moi Teaching and Referral Hospital, Eldoret, Kenya.

Background: Ankle injuries are common and protocols for management are generally well established yet a significant proportion gets long term persistent symptoms. The reasons for such an outcome are still not clearly understood and inappropriate treatment results in even higher rates of persistent symptoms. The appropriate treatment of these injuries is of primary importance in order to avoid suffering from serious long term morbidity. MTRH serves a vast geographical catchment area, mainly the western region of Kenya, with a high demand for trauma care of which a significant proportion is ankle injuries. No previous studies have looked at ankle injuries at MTRH and therefore there is need to document treatment and outcome of these injuries. This study addressed these key areas of ankle injury management.

Objectives: To determine the treatment and outcome of ankle injuries at MTRH.

Methodology: This was a prospective study of ankle injury patients presenting at MTRH Eldoret within the study period from 1st November 2009 to 30th April 2011. Those fitting the inclusion criteria were recruited into the study. Treatment offered to the patients was recorded. Follow up was scheduled appropriately both in the orthopaedic surgical wards and orthopaedic trauma clinic. Follow up was done for 6 months in each case and both clinical and radiological evaluations recorded to determine outcome. All data was recorded in a questionnaire and later entered into Statistical Package for Social Scientists (SPSS) version 19 computer soft ware and analyzed in accordance with the study objectives.

Results: The age of the patients ranged from 10 – 75 years with a mean age of 37 ± 15 years and a female to male ratio of 1.2:1. An infection rate of 10% in patients treated by ORIF and 41.67% in open injuries were documented. There was a significantly higher rate of complications in the unstable fractures treated by closed reduction and POP (92.3%) as compared to both the stable fractures treated by POP (25%) and the unstable fractures treated by ORIF (37.7%).

Conclusion and recommendations: A high rate of infection was recorded in both open fractures and closed fractures treated by ORIF and measures are required to reduce this rate of infection. The unstable ankle injuries treated by closed reduction and POP application had a very high rate of complications and availing the appropriate facilities for operative treatment of ankle fractures would improve patient care and prognosis at MTRH.