

**THE MANAGEMENT OF PATIENTS WITH POST- TRAUMATIC
EXPOSED BONES AT MOI TEACHING AND REFERRAL HOSPITAL,**

ELDORET, KENYA.

BY:

DR. AYUMBA, BARRY RAMADHANI

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ABSTRACT

Background: The global frequency for open long bone fracture is at least 11.5 cases per 100,000 persons per year. Precise published research information regarding the characteristics and the management of patients with post- traumatic exposed bones for Africa, Kenya and Moi Teaching and Referral Hospital- Eldoret is non- existent. This study will provide the much needed research information.

Objective: To assess the characteristics of patients with post- traumatic exposed bones and their management at Moi Teaching and Referral Hospital, Eldoret.

Methodology: The study site was MTRH while the design was hospital based descriptive retrospective. Subjects targeted were all patients managed for post-traumatic exposed bones between 1st January, 2006 and 31st December, 2010. Study methods included records search and non- probability purposive sampling of 323 patients. These were subjected to eligibility criteria to get sample size of 196 patients. Eligibility criteria: included were patients with post- traumatic exposed bones who benefited from surgical interventions while excluded were patients who died on admission and could not benefit from surgical interventions, or patients whose files had inadequate information. Data was gathered, recorded in observation checklist, organized, cleaned and analyzed in the statistical package for social science software version 19.

Results: Males-167, females-29; ratio: 5.76:1. Mean age: 32.51years (SD=13.26). Referrals were 51%, at least 60% were of low literacy and income earning status, whereas 64.8% were married and 94.9% were Christians. All Patients had exposed bones due to open fractures (97%) and degloving injuries (3%) in association with polytrauma (36.8%). RTAs were responsible in 49.5% of the patients. Duration of ailment was 0- 300days (median= 1.00). All patients had radiographs while 23.5% had severe anaemia among other derangements. All patients benefited from surgical interventions (debridements, irrigation, fracture stabilizations and coverage). Waiting time for surgery was 0- 67 days (median= 1.00); while number of procedures were 1- 9 (mean= 2, (SD=1.6)). Survival was 99.5%; length of hospitalization was 2- 177 days (median= 24.00; mean= 36.3 days (SD= 32.8)). The main complication was infection (62 patients). Follow up was adhered to by 59% of the patients.

Conclusion and Recommendations: Majority of patients were: referred, males, of low literacy and low income earning status. All patients had exposed bones while 36.8% had polytrauma. The majority of the patients benefited from one form or another of the numerous surgical interventions with satisfactory outcome. Scarcity of resources remained major challenge. There is need to create awareness and empower people socio-economically; as well as providing resources required in prevention, control and treatment of this disorder.