5. Hrvatski traumatološki kongres 2017 s međunarodnim sudjelovanjem

5th Croatian trauma congress 2017 with international participation

2nd Croatian - Slovenian Trauma Congress

Book of abstracts
Knjiga sažetaka

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Hotel Antunovic
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EARLY SURGICAL SITE INFECTION FOLLOWING REMOVAL OF THE SYNDESMOTIC SCREW IN ANKLE FRACTURES

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AIM
Ankle fracture is the most common injury of the lower extremity which is often accompanied by a disruption of the distal tibio-fibular syndesmosis. The disruption of the distal tibio-fibular syndesmosis is retained by one or two tri/quadricortical positioning screws. In the last decade, routine removal of the positioning screw has become debatable. The aim of this study is to examine the incidence of surgical site infection following positioning screw removal.
MATERIALS AND METHODS
This prospective study was conducted on 114 patients that had undergone positioning screw removal. No antibiotic prophylaxis was given during this procedure. The patients' follow-up was one week, two weeks, one month and three months following surgery. The occurrence of an infection was statistically examined in correlation with the sex, age, body mass index (BMI), diabetes, smoking and the ASA score. The significance was tested with the SPSS Software.
RESULTS
Surgical site infection following positioning screw removal was registered in 8 patients (7%). Five of them had S. aureus isolated from their surgical wound, one had Pseudomonas aeruginosa and another one Enterococcus faecalis. One patient had a negative microbiological finding. One patient needed hospitalization, parenteral antibiotic therapy and a surgical treatment of the wound. Statistically significant risk factors were: diabetes (Pearson Chi-square:6.23, df=1, p=0.01), BMI (tvalue-4.77, df=112, p)