

Estimation of Immobilization Period for Nonoperatively Treated Proximal Humeral Fractures

There is no consensus on the optimal immobilization time for proximal humeral fractures (PHFs) and its effect on pain, functional outcomes, and complications



Prospective randomized trial of 111 patients with nonoperatively treated PHFs



Group I - 55 patients
(1-week immobilization)



Group II - 56 patients
(3-week immobilization)

Key outcomes studied



- Pain using visual analog scale (VAS) at 1 and 3 week and 3, 6, 12, and 24 month follow ups
- Functional outcomes using Constant score or Simple Shoulder Test (SST) at 3, 6, 12, and 24 month follow ups
- Complications and secondary displacement



No significant difference between Groups I and II in pain measured with VAS



No significant difference in Constant score or SST score at any point in time



No significant differences in complication rate between both groups



Similar outcomes for short- and long-term immobilization for PHFs demonstrate that 1 week of immobilization is sufficient for fracture management to avoid compromising patient independence

One Versus 3-Week Immobilization Period for Nonoperatively Treated Proximal Humeral Fractures. A Prospective Randomized Trial

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