

# Distal Radius Internal Fixation Trial

<b>Submission date</b> 14/05/2014	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 14/05/2014	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 19/02/2020	<b>Condition category</b> Musculoskeletal Diseases	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

9191

## Study information

Scientific Title

Surgical interventions for treating intra and extra-articular distal radius fractures: a randomised controlled trial of internal fixation with plate & screws versus percutaneous K-wiring

**Acronym**

Distal Radius Internal Fixation Trial

**Study objectives**

The aim of this study is to assess the functional benefit/value for money of fixation of low-impact wrist fractures using a volar plate compared to K wiring.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

10/H1203/19

**Study design**

Randomised; Interventional and Observational; Design type: Not specified, Treatment, Qualitative

**Primary study design**

Interventional

**Secondary study design**

Randomised controlled trial

**Study setting(s)**

Hospital

**Study type(s)**

Treatment

**Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

**Health condition(s) or problem(s) studied**

Topic: Musculoskeletal disorders; Subtopic: Musculoskeletal (all Subtopics); Disease: Musculoskeletal

**Interventions**

K-wires, The number of K-wires used and whether they are buried or not depends on the surgeon's preference.; Volar plate, The volar approach and a fixed angled locking plate should be used for patients in the plate treatment group.; Follow Up Length: 12 month(s)

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome measure**

Disability of Arm Shoulder and Hand Questionnaire functional score at baseline, 3, 6 and 12 months

**Secondary outcome measures**

1. EQ5D Questionnaire at baseline, 3, 6 and 12 months
2. Patient Diary kept for three most post-surgery
3. Patient Related Wrist Evaluation Questionnaire functional score at baseline 3, 6 and 12 months
4. Resource Usage Questionnaire at baseline, 3, 6 and 12 months
5. X-ray review at 3 and 12 months

**Overall study start date**

01/10/2010

**Completion date**

16/12/2013

**Eligibility****Key inclusion criteria**

1. The patient is skeletally mature (at least 16 years old).
2. The patient has had a low-impact trauma resulting in an isolated distal radius fracture as confirmed by Xray. Low impact fractures are those sustained in a fall from no higher than a standing position and at a velocity not above that of running.
3. The fracture is no more than 2 weeks old at the time of surgery.
4. There is no definite contraindication to, or definite indication for, one particular intervention and thus the surgeon is uncertain as to whether to treat the fracture with a plate or with wiring.
5. NonEnglish speaking patients may be entered if there is a translator present at the time of consent and they have someone to help them fill in the questionnaires

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

Planned Sample Size: 169; UK Sample Size: 169

**Total final enrolment**

170

**Key exclusion criteria**

1. The patient has not given informed consent.
2. The patient is a child under 16 years of age.
3. The patient is not medically fit for surgery.

4. The fracture has previously been treated.
5. There is major displacement of articular fragments or obvious ligament injury.
6. The fracture is not displaced or is minimally displaced so that conservative treatment rather than surgery is considered appropriate.
7. If the fracture is accompanied by a compound injury with a Gustillo grading of 2 or higher.
8. The patient is unlikely to or unable, due to a cognitive impairment (as defined by the medical team responsible, this includes drug/alcohol abuse), to provide consent and complete questionnaires.
9. If the patient is not able to complete a year of followup

Patients not eligible for the study will receive clinical care and treatment as they would per normal clinical practice.

**Date of first enrolment**

01/10/2010

**Date of final enrolment**

16/12/2013

## Locations

**Countries of recruitment**

England

United Kingdom

**Study participating centre**

Twmpath Lane

Oswestry

United Kingdom

SY10 7AG

## Sponsor information

**Organisation**

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust(UK)

**Sponsor details**

Twmpath Lane

Oswestry

England

United Kingdom

SY10 7AG

**Sponsor type**

Hospital/treatment centre

**ROR**

<https://ror.org/030mbcp39>

## **Funder(s)**

**Funder type**

Government

**Funder Name**

NIHR Research for Patient Benefit (RfPB); Grant Codes: PB-PG-0408-16214

## **Results and Publications**

**Publication and dissemination plan**

Not provided at time of registration

2017 results presented at the British Orthopaedic Association conference in <https://www.boa.ac.uk/uploads/assets/uploaded/d9355f25-8365-444d-b6648de243234932.pdf>, see abstract 735

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration