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Title: Open reduction internal fixation versus percutaneous iliosacral Screw fixation for unstable posterior pelvic ring disruptions

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Original article**Open reduction internal fixation versus percutaneous iliosacral Screw fixation for unstable posterior pelvic ring disruptions**

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Abstract:**Background:**

Surgical stabilization of posterior pelvic ring fractures can be achieved by either open or closed methods. They all provide a comparable biomechanical stability. The aim of the present study is to compare the clinical results of both techniques for treating posterior pelvic ring injuries.

Material and Methods:

Seventy patients operated for unstable posterior pelvic ring disruptions were retrospectively reviewed. We compared 35 patients treated by open reduction internal fixation (ORIF group) versus 35 patients stabilized by using closed reduction and percutaneous iliosacral screw fixation (CRIF group) under fluoroscopic guidance.

Results:

According to pelvic outcome scoring system of Pohlemann et al, 28 patients out of the ORIF group obtained good or excellent results (20 excellent and 8 good), 5 fair and 2 poor. In the CRIF group, 30 patients obtained good or excellent results (25 excellent and 5 good), 4 fair and 1 poor, $p=0.64$). The average intra operative blood loss in the ORIF group was 500cc with average blood transfusion of 2 units (1000cc) compared to blood loss 150cc in CRIF group, with average blood transfusion of 1 unit (500cc) ($p=0.002$). No intraoperative complications were reported in the ORIF group while operative guide wires were broken in two cases in the CRIF group, ($p=0.16$). There were no neurological complications observed in the ORIF group, but 1 radiculopathy (L5 root palsy) occurred in

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