

## 6. FUNCTIONAL REHABILITATION FOR UNSTABLE FRACTURES OF THE CLAVICLE

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**Introduction.** Fractures of the clavicle are quite common - in 12.5-26.1%, with a predominant lesion of people of working age (20-50 years). Unstable damage of the clavicle in the middle third inevitably affects not only the state of the damaged segment, but also the entire upper limb.

**Aim of study.** Study of effective methods of rehabilitation of patients with unstable clavicle fractures.

**Methods and materials.** Under our supervision there were 65 patients with fractures of the clavicle hospitalized to the Department of Traumatology of the Institute of Emergency Medicine in the period 2018-2021. The majority were men - 54 (83.1%), and women – 11 (16.9% ). The age of the patients ranged from 18 to 68 years, with a mean age of 43 years. The main cause of injury was household injuries - 49 patients (75.4%), as a result of falling from a standing position, as a result of slipping). Fractures of the clavicle occurred mainly in the middle third - 83% (54 patients), as well as 13.8% (9 patients) - in the distal third and 3.1% (2 patients) - fractures of the proximal end of the clavicle; with displacement were observed in 62 of cases (95.4%), without displacement - 3 (4.6%). The right clavicle was injured more often in 54% of cases (35 patients), which is associated with the dominance of the right upper limb. In all cases, fixation of clavicle fractures was performed surgically - internal osteosynthesis with a plate. The hospitalization period ranged from 1 to 9 days, with an average of 5 days. Rehabilitation activities began from the first days of hospitalization of patients. Monitoring the dynamics of rehabilitation efficiency and correction of exercise performance were carried out on the basis of orthopedic examination and instrumental research methods.

**Results.** Functional rehabilitation was prescribed in the postoperative period for all patients, in combination with adequate anesthesia and antibiotic prophylaxis, courses of physiotherapy and special exercises were carried out. In all cases, a complete restoration of range of motion in the joints of the injured limb was achieved, which allowed patients to return to their work as soon as possible.

**Conclusion.** The effectiveness of treatment for clavicle injuries is based not only on adherence to the principles of osteosynthesis, but also depends on the method of functional rehabilitation. The combination of the optimal method of surgical fixation of the fracture and adequate functional rehabilitation allows achieving the best treatment results.