

and Traumatology from January 2015 to December 2015. All patients were treated surgically, with age average of 67 years, the youngest was 46 and the oldest was 85 years old.

**Results.** The study was based on 34 medical cases. The types of implants or endoprostheses used in the treatment of trochanteric fractures were: total cemented hip prosthesis Zimmer in 4 patients, blade-plate 95° - 14 patients, 2 cases fixed with DHS (dynamic hip screw), another 2 cases with PFN (proximal femoral nail) and cemented unipolar Austin-Moore prosthesis in 12 cases. In patients with high degree of osteoporosis with total or unipolar cemented prosthesis, were mobilized in second day after surgery, they had no sitting or lying difficulties and maximum in 6 days after surgery they start to walk with pressure on lower limb as soon as the painful postoperative syndrome was solved. In patients operated with blade-plate, DHS or PFN with better bone quality mobilization in the bed was done in the second day after surgery and in the first week after surgery they start to walk in crutches without pressure on the operated limb.

**Conclusions.** Surgical treatment of trochanteric fractures remains the basic method of treatment complications of bed immobilization. Hip replacement is a successful procedure for the elderly, over 75 years with osteoporosis and comorbidities, being life saving, because it makes possible to accelerate patients mobilization and movement, therefore maximized the patients functional outcomes.

**Key words:** trochanteric fractures; hip arthroplasty; proximal femoral nail; osteoporosis.

#### **194. PERIPHERAL NERVE INJURY OF THE FOREARM: ETIOLOGY AND LESIONAL COMPLEXITY ASPECTS**

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**Introduction.** Peripheral nerve disorders comprise a gamut of problems that significantly affect patient function and quality of life. Peripheral nerves are structures that suffer injuries similar to those seen in other tissues, resulting in important motor and sensory disabilities. It is estimated that the incidence of traumatic lesions is as high as 500.000 cases per year in some countries, where 2,8% of the patients become permanently disabled due to prolonged nerve regeneration time (Noble et al., 1998; Rodrigues et al., 2004)

**Aim of the study.** Identification and examination of etiology and lesional complexity aspects in peripheral nerve injuries of forearm, as well as their independent contribution to obtained results after repair.

**Materials and methods.** A retrospective study of 200 patients surgically treated during the period 2014-2016 in our clinic. From total amount of patients, 81% (162) were men and 19% (38) women. Age limits were between 17 and 83 years. Most frequently was affected ulnar nerve, being injured in 56% cases (112 patients). Lesion of median nerve was in 36.5 % cases (73 patients) and radial nerve - in 7.5% cases (15 patients).

**Results.** In study group, the most frequently lesional mechanisms were by cutting in 78 % cases and traction or contusion in 22 % cases. Therewith was established that in 96% cases were associated a muscular or tendon injury, in 31.4% cases – open fractures of forearm bones and vascular lesions - in 48.6 % cases.

**Conclusions.** In open injuries of the forearm the ulnar nerve is the most frequently injured, being often accompanied by damage of tendons and vessels. Complexity of trauma has a negative influence on primary survey, recovery and restoration of work capacities.

**Key-words:** nerve, injury, forearm