研究業績 英文表記

Title Flexor Tendon Rupture in Zones 1 and II: A Nonrandomized Controlled Trial With Historical Control Group Author Takaya Tajima ¹ , Shiro Yoshida ⁹ , Hiroki Takashima ¹ , Taishiro Kamasaki ³ , Kotaro Jinbo ⁶ , Koji Hiraoka ³ Affiliation 1) St. Mary's Hospital 2) Hand and Microsurgery, Christine M. Kleinert Institute 3) Faculty of Rehabilitation Sciences, Department of Rehabilitation Sciences, Nishikyushu University 4) Orthopaedic Surgery, St. Mary's Hospital 5) Orthopaedic Surgery, Kurume University School of Medicine 5) Orthopaedic Surgery, Kurume University School of Medicine This study aimed to characterize follow-up outcomes of flexion and extension fixation after zones 1 and II flexor tendon rupture repair. This nonrandomized controlled trial with historical controls included 25 patients with flexor tendon ruptures of 30 fingers. The flexion fixation group consisted of 12 patients (n=14 fingers). The group with flexion fixation comprised patients who slept with their injured fingers in the flexed position (intervention group). The group with extension himitation angles were compared using Mann-Whitney U tests. Ratios of excellent and good ratings based on the Strickland assessment showed excellent or good outcomes for two (22%) of 16 fingers and seven (78%) of 14 fingers in the groups with flexion and extension fixation (p=0008 and p=0.025, respectively). Furthermore, the total angle of the distal interphalangeal (DIP) joint were higher in the group with flexion than extension fixation (p=0.025, respectively). Furthermore, the total angle of the P joint limit of extension rupture achieved an excellent Strickland rating and was more effective than extension fixation after inger and extension fixation after flexor tend	和文		
前属 1) 聖マリア病院リハビリテーション差 2) Hand and Microsurgery, Christine M. Kleinert Institute 2) 田小大学リハンリテーション学科 4) 聖マリア病院整形外科 5) 人溜米大学生学和離点外科学教室 万丈 万丈 Title Comparison of Tratment Outcomes of Different Immobilized Finger Positions After Repair of Elexer Tendon Rupture in Zones 1 and II: A Nonrandomized Controlled Trial With Historical Control Group Author Takaya Tajima ¹ , Shiro Yoshida ² , Hiroki Takashima ¹ , Taishiro Kamasaki ³ , Kotaro Jinbo ⁴ , Koji Hiroka ³ 4) 1) St. Mary's Hospital 2) Hand and Microsurgery, Christine M. Kleinert Institute 3) Faculty of Rehabilitation Sciences, Department of Rehabilitation Sciences, Nishikyushu University 4) Orthopaedic Surgery, St. Mary's Hospital 5) Orthopaedic Surgery, Kurume University School of Medicine This study a imed to characterize follow-up outcomes of flexion and extension fixation after zones I and II flexor tondon rupture repair. This nonrandomized controlled trial with historical controls included 25 patients (n=16 fingers) and the extension fixation group consisted of 12 patients (n=16 fingers) and the extended position (historical control group). Strickland assessments of the range of motion (000M) of each joint at the conclusion of hand therapy, the ratio of total active motion of the repaired, to the healthy finger (%TAF), and IP joint extension limitation angles were compared using Mann-Whitney U tests. Ratios of excellent and good ratings based on the Strickland assessment were compared using Fisher exact tests. The results of the Strickland assessment were compared using Fishere exact tests. The results of the Strickland assessme	表題		
部民 2) Hand and Microsurgery, Christine M. Kleinert Institute 3) 度九州大学リンマ海院海修林 4) 聖マリア海院海修が林 5) 久留米大学医学部整形外科学数支 近く日本大学医学部整形外科学数支 近く日本大学医学部整形外科学数支 Comparison of Treatment Outcomes of Different Immobilized Finger Positions After Repair of Flexor Tendon Rupture in Zones I and II: A Nonrandomized Controlled Trial With Historical Control Group Author Takaya Tajima ¹ , Shiro Yoshida ² , Hiroki Takashima ¹ , Taishiro Kamasaki ² , Kotaro Jinbo ⁹ , Koji Hiraoka ² Author Takaya Tajima ¹ , Shiro Yoshida ² , Hiroki Takashima ¹ , Taishiro Kamasaki ² , Kotaro Jinbo ⁹ , Koji Hiraoka ² Affiliation 1) St. Mary's Hospital 2) Hand and Microsurgery, Christine M. Kleinert Institute 3) Faculty of Rehabilitation Sciences, Department of Rehabilitation Sciences, Nishikyushu University 4) Orthopacdic Surgery, St. Mary's Hospital 5) Orthopacdic Surgery, Kurune University School of Medicine 7) Faculty of Rehabilitation Sciences, Department of Rehabilitation and extension fixation after zones I and II flexor tendon rupture repair. This nonrandomized controlled trial with historical controls included 25 patients (m=14 fingers) and the extension fixation group consisted of 12 patients (m=14 fingers). The group with Rexion fixation comprised patients who slept with their injured finger in the extended position (historical control group). Strickland assessments of the range of motion (ROM) of each joint at the conclusion of hand therapy, the ratio of total active motion of the repaired, to the healthy finger (%TAP), and IP joint extension limitation angles were compared using Mann-Whitney U tests. Ratios of excellent artigos of recellent were achieved in seven (4#%) of 16 fingers and four (28%) of 14 fingers in the gr	著者名	太島孝也 1), 吉田史郎 2), 高島広樹 1), 釜﨑大志郎 3), 神保幸太郎 4), 平岡弘二 1)	
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Author Hiraoka ⁵ 1) St. Mary's Hospital 1) St. Mary's Hospital 2) Hand and Microsurgery, Christine M. Kleinert Institute 3) Faculty of Rehabilitation Sciences, Department of Rehabilitation Sciences, Nishikyushu University 4) Orthopaedic Surgery, St. Mary's Hospital 5) Orthopaedic Surgery, Kurume University School of Medicine This study aimed to characterize follow-up outcomes of flexion and extension fixation after zones I and II flexor tendon rupture repair. This nonrandomized controlled trial with historical controls included 25 patients with flexor tendon ruptures of 30 fingers. The flexion fixation group consisted of 12 patients (n=16 fingers) and the extension fixation group consisted of 13 patients (n=14 fingers). The group with flexion fixation comprised patients who slept with their injured finger in the extended position (historical control group). Strickland assessments of the range of motion (ROM) of each joint at the conclusion of hand therapy, the ratio of total active motion of the repaired, to the healthy finger (%TAP), and IP joint extension limitation angles were compared using Mann-Whitney U tests. Ratios of excellent and good ratings based on the Strickland assessment were compared using Fisher exact tests. The results of the Strickland assessment whowed excellent or good outcomes for two (22%) of 16 fingers and seven (44%) of 16 fingers in the groups with flexion and extension fixation were, respectively, rated as good. The proportion of patients rated as excellent was significantly higher in the group with flexion than extension fixation (p=0.040). The %TAF and the active flexion angle of the itstal interphalangeal (DIP) joint were higher in the group with flexion than extension fixation (p=0.025, respectively). Furthermore, the total angle of the IP joint limit of e	Title	Control Group	
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