



## Injury Golden Issue: Even small studies can have an impact on patient care



At the beginning of 2019 it was announced that in order to mark the 50<sup>th</sup> anniversary of the journal, a special issue (Golden Issue) will be published this year [1]. A call was then made for submission of papers by all the readership of the journal and the affiliated societies for consideration and publication in the anniversary volume. A total of 124 articles were submitted for consideration. A vigorous peer reviewed process was undertaken by experts in the field of each paper submitted. Out of the 124 submissions the 27 papers included in this Golden volume were accepted for publication. The accepted papers covered such themes as basic science, general trauma, polytrauma, upper extremity, proximal femoral fractures, lower extremity and foot and ankle injuries. Each manuscript has strengths and limitations and reports a clear message that could influence our clinical practice. Selecting the prize winners is never easy. However, two manuscripts were voted by the judging panel as the joint winners. Foster K et al [2] undertook a longitudinal qualitative study to explore parent experiences and support needs and identify parent psychosocial trajectories in the 12 months following child critical injury. They carried out semi-structured in-depth interviews with 27 parents at three time points over a 12 month period (immediate hospital period post-child injury, and 6 and 12 months following injury) resulting in a total of 81 interviews. They identified three parent trajectory patterns: a) resilient trajectory (where parents were temporarily disrupted by the child's injury and hospitalisation, but recovered their mental and emotional wellbeing quickly, which was maintained over time); b) recovering trajectory (where parents were initially disrupted at the time of injury but their mental and emotional wellbeing fluctuated over time and had not been fully restored by 12 months); c) distressed trajectory (where parents experienced significant psychosocial disruption due to their child's injury and struggled to adapt and regain their wellbeing over time, remaining emotionally distressed about the circumstances and impacts of the injury on their child and family). They concluded that screening for parent psychological distress and post-traumatic stress disorder is needed from the time of the child's admission, and a dedicated trauma support role can facilitate an integrated care approach for children and families with complex needs across the care continuum.

In the second manuscript, Park KH et al [3] investigated the biomechanical strength of additional medial plate fixation over the

unstable lateral locked plating of distal femur fractures. A distal femur fracture model (AO/OTA 33-A3) was created with osteotomies in the composite femur. The authors created three study groups consisting of 6 specimens each for single-side lateral locked plating with 6 distal locking screws (LP-6), single-side lateral locked plating with 4 distal locking screws (LP-4), and additional medial locked plating on LP-4 construct (DP-4). A compressive axial load (10 mm/min) was applied in the failure test. Mode of failure, load to failure, and ultimate displacement were documented. They reported that all single-side lateral locked plating (LP-4 and LP-6) demonstrated plate bending at the fracture gap, while none of the DP-4 showed plate bending at the fracture gap. Load to failure of DP-4 (mean 5522 N) was 17.1% greater than that of LP-6 (mean 4713.3 N,  $p < 0.05$ ) and 29.2% greater than that of LP-4 (mean 4273.2 N,  $p < 0.05$ ). Ultimate displacement of DP-4 (mean 5.6 mm) was significantly lower than that of LP-6 (mean 8.8 mm,  $p < 0.05$ ) and LP-4 (mean 9.1 mm,  $p < 0.05$ ). They concluded that in clinical situations where sufficient stability cannot be provided at the distal segment, the medial plate could be considered as a useful biomechanical solution to obtain adequate stability for fracture healing.

The editorial board of Injury congratulates the joint winners for their success as well as all the other authors whose papers have been included in the golden volume.

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### References

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