RSA for Proximal Humeral Fractures: The DFER Approach

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Disclosures

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AG: Consultant for Zimmer BIOMET, Device Tech, Sironix; Founder and CEO Akunah; hold shares with Tetrous

KI: employee of Akunah





Aim of the Study

- To show the surgical technique and the outcomes of RSA for comminuted proximal humeral fractures in the elderly using an approach based on 4 important principles (DFER Approach):
 - **D** Delayed surgery
 - **F** Functional tuberosity reattachment
 - E External rotation abduction brace
 - **R** early Rehabilitation





Methods

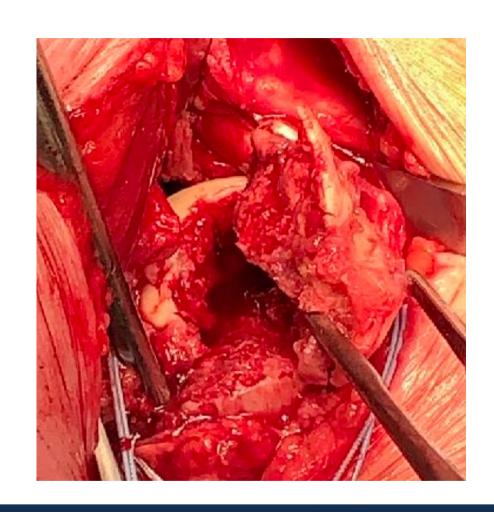
- Patients with comminuted proximal humeral fracture who underwent RSA following the DFER approach from 2016 to May 2022
- Clinical outcomes (preop, 6 months, 12 months, 24 months postop)
 - Active range of motion (forward elevation, lateral elevation, ER, IR)
 - VAS
 - Constant score
 - ASES score
- Radiographic outcome: tuberosity healing at 3-month CT scan/x-ray





D - Delayed surgery

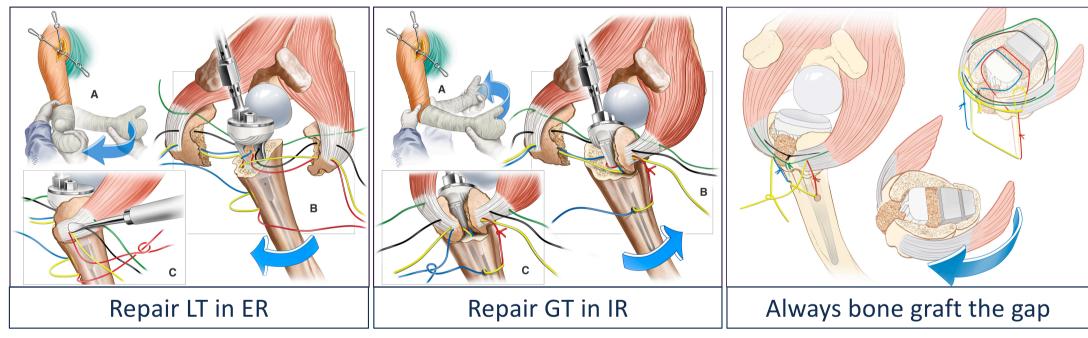
- 2 to 3 weeks after injury
- Better soft tissue conditions
- Better tuberosities management







F – Functional tuberosities reattachment



Rigid suture fixation between the diaphysis-stem-tuberosities





E – External rotation brace

- Brace with 60-degree abduction
- Weakens powerful abductors
- Stabilises scapulothoracic joint
- Allows patient to commence active rotation while in brace







R - Rehabilitation (early)

- Active rotations in brace from day 0
- Wall walks at 48 hours
- Concentrate on scapular stabilisation
- Forward flexion
- Unrestricted ER and IR from day 1

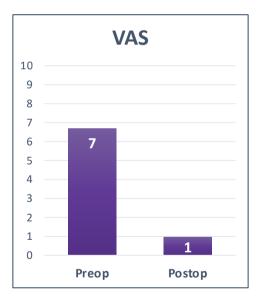


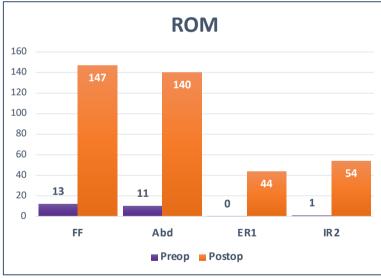


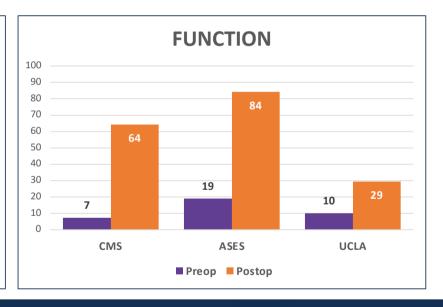


Results

- 50 patients (mean age: 72yo)
- Mean follow-up: 24 months











Results

• 100% tuberosity healing at 3 months



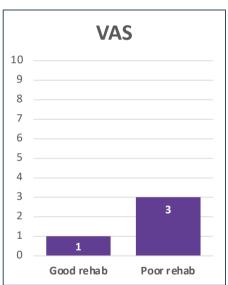


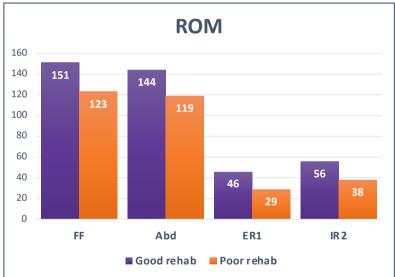


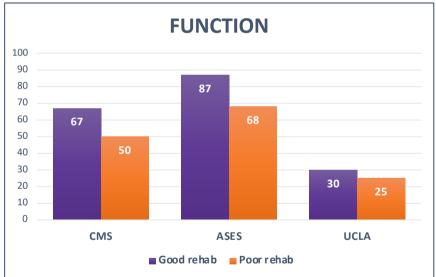
Results

6 patients who did not comply with DFER protocol













Conclusion

- The DFER approach results in satisfactory outcomes in RSA for acute proximal humeral fracture.
- It ensures rigid tuberosity fixation and early active mobilisation following surgery.
- Patients who were not able to follow the prescribed rehabilitation protocol did not do as well as those who were compliant with physiotherapy, proving the importance of compliance with prescribed rehabilitation postoperatively.



