

Schepers T, Van Lieshout EM, et al. Aftercare following syndesmotic screw placement: a systematic review. J Foot Ankle Surg. 2013;52(4):491-4.

Design: systematic review of nonrandomized trials

Purpose of study: to estimate whether there are differences in outcome in patients who have had syndesmotic injuries treated with screw placement between postoperative care which provides for early mobilization (within 2 weeks of screw placement) and care which delays mobilization for six weeks or more

Reasons not to cite as evidence:

- The selection criteria for the search (which was up through September 2012) did not include randomized trials
- The authors stipulate that their study provided level 4 evidence, and found no differences between early and later mobilization postoperatively
- The majority of studies were from case series which reported outcomes on validated scoring systems such as the American Orthopedic Foot Ankle Society Hindfoot score (AOFAS) and the Olerud-Molander Ankle Score (OMAS)
 - o The outcome scores in the studies of early mobilization were very close to the outcome scores in the studies of longer immobilization, but direct comparisons between randomized (and therefore prognostically balanced) patients were not done
 - o If there were factors in the early mobilization patients (such as a perception that their injuries were less severe and would tolerate earlier mobilization), the comparisons between different case series could underestimate a potential advantage of keeping the joint in a cast for more than two weeks

Possible citation as information: Currently, there is a lack of evidence in the setting of syndesmotic injuries treated with screw placement between a postoperative strategy of allowing mobilization within two weeks and a strategy which delays mobilization for six weeks. The decision may be tailored to the circumstances of the individual patient.