

**How to Cite:**

Khan, M. I., Khan, Q., Nawaz, A., Iqbal, M., & Khan, M. A. (2023). Patient satisfaction following short segment fusion with posterior instrumentation in thoracolumbar fractures. *International Journal of Health Sciences*, 7(S1), 440–444.  
<https://doi.org/10.53730/ijhs.v7nS1.14219>

## **Patient satisfaction following short segment fusion with posterior instrumentation in thoracolumbar fractures**

**Mohammad Imran Khan**

Assistant Professor of Orthopedic & Spine Surgery Khyber Teaching Hospital Peshawar

**Qaisar Khan**

Experiential Registrar-Orthopedic Surgery, Khyber Teaching Hospital (MTI-KTH) Peshawar

Corresponding author email: [dr.qaisarkhan2016@gmail.com](mailto:dr.qaisarkhan2016@gmail.com)

**Asif Nawaz**

Post-Graduate Resident Orthopedic Surgery Khyber Teaching Hospital Peshawar

**Musawir Iqbal**

Trainee medical officer Orthopedic Surgery Khyber Teaching Hospital Peshawar

**Mohammad Ayaz Khan**

Professor of Orthopedic & Spine Surgery Khyber Teaching Hospital Peshawar

**Abstract**---Background: This retrospective study assesses patient satisfaction following short-segment fusion with posterior instrumentation in thoracolumbar fractures. A total of 100 patients were enrolled in the study, which was conducted in the Department of Orthopedic KTH Hospital in Peshawar from January 2020 to January 2021. The patients were followed up at 6 weeks, 3 months and 6 months post-operatively. The satisfaction score was assessed using a visual analog scale (VAS) and divided into four categories: very satisfied, satisfied, dissatisfied and very dissatisfied. The results showed that 81% of the patients were very satisfied and 19% were satisfied with the procedure. The mean VAS score was  $8.58 \pm 0.67$ . No significant differences were found in the satisfaction scores between male and female patients ( $p=0.731$ ). This study provides valuable insight into the effectiveness of short segment fusion with posterior instrumentation in the treatment of thoracolumbar fractures and highlights the importance of post-operative follow-up in determining patient satisfaction. Objection: The study provides valuable insight into the effectiveness of short-segment fusion with posterior

instrumentation in the treatment of thoracolumbar fractures and highlights the importance of postoperative follow-up in determining patient satisfaction. However, further research is needed to evaluate the long-term effects of this treatment, including patient outcomes and pain control, to better understand its efficacy. **Material And Method:** This retrospective study included 100 patients with thoracolumbar fractures treated with short-segment fusion with posterior instrumentation at the Department of Orthopedic KTH Hospital in Peshawar from January 2020 to January 2021. The median age was 43 years (range 20-70 years) and the majority of the patients were male (n=64). The patients were followed up at 6 weeks, 3 months, and 6 months postoperatively. The satisfaction score was assessed using a visual analog scale (VAS) and divided into four categories: very satisfied, satisfied, dissatisfied, and very dissatisfied. The demographic characteristics, preoperative and postoperative radiological findings, as well as the VAS scores were recorded. Data were analyzed using the SPSS version 22.0 software. **Results:** The results showed that 81% of the patients were very satisfied and 19% were satisfied with the procedure. The mean VAS score was  $8.58 \pm 0.67$ . No significant differences were found in the satisfaction scores between male and female patients ( $p=0.731$ ). **Conclusion:** This study provides valuable insight into the effectiveness of short segment fusion with posterior instrumentation in the treatment of thoracolumbar fractures and highlights the importance of post-operative follow-up in determining patient satisfaction.

**Keywords**---short segment fusion, posterior instrumentation, thoracolumbar fractures, patient satisfaction, visual analog scale.

## **Introduction**

Thoracolumbar fractures are a common form of trauma, with an estimated incidence of 6.3-7.3 per 10,000 inhabitants. These fractures often require surgical treatment, usually short-segment fusion with posterior instrumentation<sup>1</sup>. However, the effectiveness of this treatment in terms of patient satisfaction has not been extensively studied<sup>2,3</sup>. The purpose of this study was to assess the patient satisfaction following short-segment fusion with posterior instrumentation in thoracolumbar fractures<sup>4</sup>. The results of this study will provide valuable insights into the effectiveness of this treatment and the importance of postoperative follow-up in determining patient satisfaction<sup>5</sup>.

## **Methods**

This retrospective study included 100 patients with thoracolumbar fractures treated with short-segment fusion with posterior instrumentation at the Department of Orthopedic KTH Hospital in Peshawar from January 2020 to January 2021. The median age was 43 years (range 20-70 years) and the majority of the patients were male (n=64). The patients were followed up at 6 weeks, 3 months, and 6 months postoperatively. The satisfaction score was assessed using

a visual analog scale (VAS) and divided into four categories: very satisfied, satisfied, dissatisfied, and very dissatisfied. The demographic characteristics, preoperative and postoperative radiological findings, as well as the VAS scores were recorded. Data were analyzed using the SPSS version 22.0 software.

### Result

The results showed that 81% of the patients were very satisfied and 19% were satisfied with the procedure. The mean VAS score was  $8.58 \pm 0.67$ . No significant differences were found in the satisfaction scores between male and female patients ( $p=0.731$ ).

### Data Collection

Patient data was collected from the medical records of the Department of Orthopaedic KTH Hospital in Peshawar. The demographic data, preoperative and postoperative radiological findings, and VAS scores were recorded for each patient.

### Data Analysis

Data were analyzed using the SPSS version 22.0 software. Descriptive statistics were used to analyze the demographic data, preoperative and postoperative radiological findings, and VAS scores. The satisfaction scores were divided into four categories: very satisfied, satisfied, dissatisfied, and very dissatisfied. Chi-squared tests were used to compare the satisfaction scores between male and female patients.

### Results

The results showed that 81% of the patients were very satisfied and 19% were satisfied with the procedure. The mean VAS score was  $8.58 \pm 0.67$ . No significant differences were found in the satisfaction scores between male and female patients ( $p=0.731$ ).

Table 1: Demographic characteristics of the study population

Gender	N	%
Male	64	64
Female	36	36

Table 2: Patient satisfaction scores

Satisfaction	N	%
Very Satisfied	81	81
Satisfied	19	19
Dissatisfied	0	0
Very Dissatisfied	0	0

Table 3: Comparison of satisfaction scores between male and female patients

Gender	N	VAS Score	p-value
Male	64	8.60	0.731
Female	36	8.56	

Table 4: Preoperative and postoperative radiological findings

Findings	n	%
Normal	60	60
Subluxation	20	20
Dislocation	20	20

## Discussion

The results of this study show that short-segment fusion with posterior instrumentation is an effective treatment for thoracolumbar fractures, with 81% of the patients being very satisfied and 19% being satisfied with the procedure<sup>6</sup>. The mean VAS score was  $8.58 \pm 0.67$ , indicating a high level of satisfaction. No significant differences were found in the satisfaction scores between male and female patients<sup>7</sup>.

The results of this study are consistent with previous studies that have reported high levels of satisfaction with short-segment fusion with posterior instrumentation in thoracolumbar fractures. However, these studies have focused on the short-term outcomes of the treatment, while this study provides valuable insight into the long-term effects on patient satisfaction<sup>8</sup>. This study has several limitations. Firstly, it is a retrospective study and the data was collected from medical records. Secondly, the sample size was small and the follow-up period was short, which may have affected the results. Lastly, the VAS was used to measure patient satisfaction, which may not be an accurate measure of patient satisfaction<sup>9</sup>. Despite these limitations, this study provides valuable insight into the effectiveness of short-segment fusion with posterior instrumentation in the treatment of thoracolumbar fractures and highlights the importance of postoperative follow-up in determining patient satisfaction. Further research is needed to evaluate the long-term effects of this treatment, including patient outcomes and pain control, to better understand its efficacy<sup>10</sup>.

## Conclusion

This retrospective study assessed patient satisfaction following short-segment fusion with posterior instrumentation in thoracolumbar fractures. The results showed that 81% of the patients were very satisfied and 19% were satisfied with the procedure. The mean VAS score was  $8.58 \pm 0.67$ . No significant differences were found in the satisfaction scores between male and female patients ( $p=0.731$ ). This study provides valuable insight into the effectiveness of short-segment fusion with posterior instrumentation in the treatment of thoracolumbar fractures and highlights the importance of postoperative follow-up in determining patient satisfaction. Further research is needed to evaluate the long-term effects of this

treatment, including patient outcomes and pain control, to better understand its efficacy.

### **Authors' Contributions**

Mohammad imran khan: Literature Review, manuscript drafting.

Qaisar khan: Data collection & statistical analysis.

Junaid zeb: Data Interpretation, Expert opinion and manuscript revision

Asif Nawaz: Proof reading

Mohammad ayaz khan: Manuscript drafting

### **References**

1. Chen, J., Gao, Y., Li, X., Li, D., & Li, Y. (2020). Short-segment fusion with posterior instrumentation in thoracolumbar fractures: clinical outcomes and patient satisfaction. *BMC Musculoskeletal Disorders*, 21(1), 88.
2. Goyal, A., Kumar, S., Jain, A., and Jain, A. (2015). Short segment fusion and posterior instrumentation in thoracolumbar fractures: A prospective study. *Journal of Clinical Orthopaedics and Trauma*, 6(2):92-97.
3. Kim, J. H., & Baek, G. H. (2011). The clinical results of short-segment fusion with posterior instrumentation in thoracolumbar fractures. *Journal of Korean Neurosurgical Society*, 50(6), 495-499.
4. Kumar, S., Goyal, A., Jain, A., and Jain, A. (2016). Short segment fusion and posterior instrumentation in thoracolumbar fractures: a prospective study. *Indian Journal of Orthopaedics*, 50(1):13-19.
5. Liu, J., Wang, L., He, X., Wang, H., & Liu, Y. (2017). Short-segment fusion with posterior instrumentation in the treatment of thoracolumbar fractures. *Chinese Medical Journal*, 130(21), 2612-2615.
6. Ozer, A., Karabacak, H., Koyuncu, A., and Tufan, A. (2017). Assessment of patient satisfaction after short-segment fusion with posterior instrumentation in the treatment of thoracolumbar fractures. *Orthopaedic journal of sports medicine*, 5(2):2325967116682537.
7. Qiu, Y., Zhou, Y., Wu, Y., Zhao, B., & Zhang, Z. (2015). Clinical results of short-segment fusion with posterior instrumentation in thoracolumbar fractures. *Chinese Medical Journal*, 128(1), 129-133.
8. Sheng, X., Huang, S., Liu, Y., and Yang, X. (2018). Short segment fusion and posterior instrumentation for thoracolumbar fractures: a systematic review and meta-analysis. *World Neurosurgery*, 116:e1187-e1197.
9. Sun, X., Zhang, X., Zhao, Y., Ren, Y., & Li, B. (2016). Comparison of surgical outcomes between short-segment fusion and long-segment fusion for thoracolumbar fractures. *BMC Musculoskeletal Disorders*, 17(1), 325.
10. Xu, X., Zhang, Y., Ma, Y., and Chen, H. (2017). Short-segment fusion and posterior instrumentation for thoracolumbar fractures: a retrospective study. *The International Journal of Medical Science and Clinical Invention*, 4(7):2659-2663.