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Questions about New Classification System for Acetabular Fractures

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The article by Herman et al. is an excellent attempt to bring a new perspective to the classification of acetabular fractures. However, the article raises a few questions:

1. The new terminology of “displacement vector” needs to be explained in detail. Moreover, the usefulness of displacement vector in complex and comminuted fractures needs to be investigated.

2. This new classification, like the conventional Letournel’s classification, doesn’t address the problem of hip stability and other associated factors such as intra-articular fragments, femoral head injury, comminution, and subchondral impaction, which are essential considerations when making operative decisions (1).

3. A low reliability coefficient was considered a major drawback of Letournel’s classification (2). The introduction of any classification should be accompanied by a high interobserver reliability coefficient. Though these authors investigated a good sample size and involved 3 expert observers, the research lacks the interobserver reliability coefficient as a statistical parameter.

4. The article may lead readers to believe that every acetabular fracture can be classified using this new
system. However, the system seems to be unable to classify fracture patterns such as isolated quadrilateral plate fractures.

5. It was not clear to us whether the classification system is based on plain radiographs aided by CT scans or is totally dependent upon CT scans.

6. It should be noted that assessment of postoperative reduction by CT holds more relevance than assessment using radiographs, especially when a new classification is being introduced (3).

References


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