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Diagnosis and Treatment of Distal Radial Fractures—2nd Edition

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Deadline for manuscript
submissions:

closed (30 September 2024)

Message from the Guest Editors

Fractures of the distal radius represent the most common orthopedic injuries: one out of every six fractures presented at emergency departments is a distal radius fracture. Almost two-thirds of these fractures are displaced and need to be reduced. Osteoporosis is strictly associated with these fractures, leading to an additional investigation with a dual-energy X-ray absorptiometer after trauma. Both conservative and surgical options are available for these fractures, with their own peculiar advantages and complications. The choice of treatment depends on age, lifestyle, functional demands, limb dominance, type of fracture, severity, alignment of the fracture, and condition of the soft tissue. Treatment by closed reduction and cast immobilization is still valid, even if it may lead to poor radiological results and displacement, especially in worst fracture patterns. Several surgical options for distal radius fractures have been described.

We encourage you and your co-workers to submit your articles reporting on this topic. We also welcome reviews or original articles, with the aim of updating the diagnosis and treatment of these fractures.



mdpi.com/si/200102

Special Issue



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Message from the Editor-in-Chief

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