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*“Correlation Between the Capitate-to-Axis-of-Radius Distance (CARD) Radiographic Index and Patient-Reported Outcomes One Year Post Distal Radius Fracture”*

A broken wrist/wrist fracture (distal radius) is a very common injury in adults, which can result from low energy falls on an outstretched hand or from higher force trauma such as a car accident. To ensure a distal radius fracture heals properly, the bones of the wrist must be properly stabilized. This can be done surgically in the operating room or non-surgically in a cast depending on the severity of the fracture. If the bones are not accurately aligned during healing, future problems with wrist and elbow movement can occur which can impact patients' quality of life. Successful healing is determined from patient feedback and by using x-rays to monitor the position of the wrist bones over time.

Researchers in London, Ontario, Canada have developed a new method that uses x-ray images to measure the distance and alignment of the bones of the wrist which indicate normal wrist alignment. This measurement is called the Capitate-to-Axis-of Radius Distance (CARD). The CARD is a new measurement and this can be used as a measure to help ensure the wrist is in a normal position at the time of treatment and in assessing healing over time in addition to other well established x-ray parameters.

The purpose of this study is to compare the CARD with patient surveys on wrist function and satisfaction to determine how well the CARD corresponds with patient outcomes at a minimum of one year after the injury. This research will determine how well the CARD correlates with patient-reported outcome measures and if it can be used as an additional tool in monitoring distal radius fracture treatment and outcomes in adults.