

under three bracing conditions (no LO, a flat LO and a lordotic LO) were seated on a seesaw, positioned above a force platform. Postural control was assessed through a decomposition of the centre of pressure (CP) movements into two basic components: the vertical projection of the centre of gravity (CGv) and its difference from the centre of pressure (CP–CGv).

Compared to healthy subjects, LBP patients exhibited a rigid strategy as demonstrated by a 30% ($P < 0.001$) decrease in the RMS and a 41% ($P < 0.001$) increase in the MPF of the CP–CGv movements. Their postural control changed drastically, particularly when a lordotic LO (more congruent) was worn, and was close to the postural control observed in healthy subjects.

In the future, this assessment could help target the most appropriate LO allowing patients to prevent a possible recurrence.

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P117-e

Hand trauma: Epidemiology and functional outcome in an outpatient rehabilitation department

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Keywords: Epidemiology; Hand injuries; Rehabilitation; Functional outcome
Objective.– To examine the epidemiology and therapeutic modalities of hand injuries, the functional outcome and the professional impact in patients managed in a physical medicine and rehabilitation (PMR) department.

Methods.– We reviewed 400 consecutive medical records of patients treated for hand injuries at a department of PMR.

Results.– The average age of patients was 33.5 years \pm 14.01 with a men predominance (74.8%). Eighty-six percent of patients were active and 46.2% among them performed hard jobs. Etiologies were mostly occupational and domestic accidents (42% and 37.5%). The main cause was sharp objects (36.75%). Most common types of injuries were fractures (43.8%) and tendons rupture (36%). The average duration of rehabilitation was 7.12 \pm 8.18 weeks. The total follow-up time was 6.71 \pm 8.9 weeks; 59.25% of our patients had good functional result. The average work-loss days were 68.9 \pm 55.7 days. Predictive factors of bad functional results were the responsibility of occupational accident in cases of flexor and extensor tendons ruptures [(OR = 0.23; 95% CI, 0.05–0.98) and (OR = 0.09; 95% CI, 0.01–0.91)] and the occurrence of complications in cases of fractures (OR = 4.84; 95% CI, 1.57–14.85).

Conclusion.– Our study allowed us to highlight the requirement of a multidisciplinary management of hand injuries with PMR as corner stone.

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P118-e

Modifiable risk factors and lumbar disc herniation: Results of a case control study in 652 patients

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Keywords: Lumbar disc herniation; Smoking; Body mass index; Heavy physical work; Risk factors

Introduction.– Investigation of modifiable risk factors for development of lumbar disc herniation has been requested.

Objective.– To determine associations between modifiable risk factors (smoking, elevated Body Mass Index [BMI] and heavy physical work activities) and lumbar disc herniation, and to discuss possible mechanisms for observed associations. Understanding the underlying mechanisms may provide new insights for the prevention and treatment of this disorder.

lished diagnosis of lumbar disc herniation by magnetic resonance imaging (MRI) and 326 patients without this pathology ruled out by MRI. The age, sex, BMI, work occupation and smoking status were investigated.

Results.– There was a statistically significant positive association between smoking ($P = 0.004$, OR = 1.75 CI95% 1.25–2.45), high BMI ($P = 0.00$) and heavy physical work ($P = 0.158$, OR = 2.00 CI95% 1.43–2.76) and lumbar disc herniation. It showed that these modifiable risk factors could predict lumbar disc herniation.

Discussion.– A high BMI, smoking and heavy physical work are the major modifiable risk factors for lumbar disc herniation.

Further reading

Shiri R, Karppinen J, Leino-Arjas P, Solovieva S, Varonen H, Kalso E, et al. Cardiovascular and lifestyle risk factors in lumbar radicular pain or clinically defined sciatica: a systematic review. *Eur Spine J* 2007;16:2043–54.

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P119-e

Role of talectomy in management of severe equinovarus deformity in adults

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Keywords: Equinovarus; Talectomy; Difficulty walking

Objectives.– Evaluate talectomy performed for adults' severe equinovarus.

Methods.– Case series. Four adult patients (7 feet) with Charcot-Marie-Tooth hereditary peripheral neuropathy or neglected clubfoot are functionally and radiologically evaluated pre and post-surgery.

Results.– Pre-surgery mean equinus was 76°, mean varus 86°, mean foot functional index 117/230 and walking barefoot was impossible for all patients. After surgery mean equinus was 7°, mean varus 0°, mean functional foot index was 36/230. All four could walk at least few steps barefoot. No postoperative complications occurred.

Discussion.– Severe equinovarus reduces functional abilities and quality of life. Talectomy can be a good alternative when classic treatment cannot be proposed.

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P120-e

Tarlov cyst: Unusual cause of sciatica

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Keywords: Sciatica; Tarlov cyst

Introduction.– Tarlov cysts usually involve the lumbosacral roots and are often asymptomatic. However, they may be responsible for sciatica, motor deficit and urinary disorders, even outside of a compression element associated (disc herniation, spondylolisthesis, spinal stenosis).

We report the case of a patient hospitalized in the service of physical medicine and rehabilitation functional for sciatica by a Tarlov cyst.

Observation.– Mrs. D. aged 60, diabetic, who consults for bilateral sciatica S1, evolving for several years. The review found a spinal syndrome and no signs of disco-radicular conflict. A lumbar MRI showed a Tarlov cyst. The patient received a puncture and infiltration of the cyst under scanner. The evolution is characterized by improved lombo-radicular pain.

Discussion.– Currently Tarlov cysts, are revealed by MRI of the spine more than by the scanner and myelography through a lomboradiculalgie exploration. Treatment may be medical or surgical that is aimed at symptomatic Tarlov cysts.

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