Objective
Most clinical evaluations after fracture treatment focus on pure functional and radiological outcome. However, this may not appreciate the impact on quality of life (QoL). The aim of this study was to assess QoL and its improvement during the first year of postoperative recovery after fracture treatment.

Design
Prospective single-centre observational study.

Setting
Trauma unit. City hospital.

Patients
From March 2003 to June 2008 inclusion of 269 consecutive patients (72 years, 77% female) was possible. All were treated by open reduction and internal fixation (ORIF) with PHILOS because of isolated traumatic fractures of the proximal humerus.

Intervention
Clinical follow-up examinations were performed at 6 weeks and 3, 6, and 12 months, postoperatively.

Main Outcome Measurements
Constant-Murley score (CMS) and the QoL (SF-36 questionnaire) were used to assess outcome. All results were stratified according to length of follow-up, age, and fracture type.

Results
CMS and SF-36, including the corresponding subgroups Physical Component Summary and Mental Component Summary, demonstrated continuing improvement during the period of observation. US norm values for the SF-36 were achieved after 6 months. However, speed of progress varied greatly between the scores and age groups. The fracture type significantly impacted CMS. Increasing age and complexity of fracture influenced the results
negatively and cumulatively.

CONCLUSION
This study highlights and defines subjective improvements and changes of QoL up to 1 year after ORIF of these fractures. Increasing age and a more complex fracture type is correlated with a deceleration of functional improvement. The CMS shows a definite positive correlation with the unassisted self-evaluation of SF-36, but exchangeability could not be demonstrated.

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