12 of the 59 were review articles, two were randomised studies. We excluded articles in which scaphoid was not the subject and cadaver studies of anatomy, biomechanical or surgical techniques. Publications in which scaphoid fractures were mentioned as part of more extensive hand injuries (radial fracture, wrist fracture, ligament injury) were excluded. Epidemiological studies, articles on sequelae, individual case reports, expert opinions and reports were also excluded. After excluding duplicates, we were left with 160 articles. Percutaneous screw fixation versus conservative treatment for fractures of the waist of the scaphoid: a prospective randomised study. J Bone Joint Surg Br 2008; 90: 66 – 71. [PubMed] [CrossRef]. Fractures of the scaphoid constitute 2-7% of all fractures; they are second to distal radial fractures1. The tiny blood supply combined with the demanding functional requirements could lead to delayed healing1. Eighty to ninety percent involve the scaphoid1. The incidence is approximately 5 in every 10,000 in Western countries1. Percutaneous Screw Fixation versus Conservative Treatment for Fractures of the Waist of the Scaphoid: A Prospective Randomised Study. J Bone Joint Surg Br 2008; 90(1): 66-71. 9. Papaloizos MY, Fusetti C, Christen T, et al. Minimally Invasive Fixation versus Conservative Treatment of Undisplaced Scaphoid Fractures: A Cost-effectiveness Study. J Hand Surg Br 2004; 29(2): 116-9. 10. Yip HS, Wu WC, Chang RY, et al. Gerdin B, Alho A. Percutaneous screw fixation versus conservative treatment for fractures of the waist of the scaphoid: a prospective randomised study. J Bone Joint Surg Scr 2008; 90(1): 66-71.