

FUTILE CLOSED REDUCTION OF DISLOCATION OF CARPOMETACARPAL JOINT OF THUMB - CASE REPORT

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Introduction: Carpometacarpal joint of thumb is an inherently stable joint and it allows great range of motion due to its ligamentous stabilizers and its bi-saddle configuration. Traumatic dislocation of carpometacarpal joint of thumb is rare. Treatment of traumatic dislocation of carpometacarpal joint of thumb is different from treatment of dislocations in other joints of hand due to its unusual anatomy. Most of the authors suggested open reduction and ligamentous reconstruction for unstable acute traumatic carpometacarpal joint of thumb. There is another group of authors described open reduction and ligament (stabilizer) repair using suture anchors.

Discussion: A 42-year-old labourer presented to emergency department complaining of pain at the base of his right thumb after a motor vehicle accident. He was diagnosed to have dislocation of carpometacarpal joint of his right thumb. Closed reduction of the dislocated joint was attempted multiple times by the emergency department. However, the closed reductions were not successful as the carpometacarpal joint was unstable. Patient underwent surgery for open reduction and ligament repair. Suture anchor was used to repair the volar anterior oblique ligament and the dorsoradial ligament was repaired using braided non-absorbable suture. Pinning of the joint was performed to protect the repairs. At 6 month post-operatively, there was no clinical and radiologic dislocation or subluxation.

Conclusion: This case report is to report the attempt of closed reduction is often futile due to the unstable nature of the joint when the main stabilizers are lacking. It also highlights the unique situation of traumatic dislocation of carpometacarpal joint of thumb where junior doctors who have not encountered such condition previously might have difficulties in providing appropriate treatment to patients. It is also worth reporting that satisfactory result of direct repair of main stabilizers of carpometacarpal joint of thumb can be achieved in acute setting.