

NEGLECTED CHRONIC TALONAVICULAR SUBLUXATION

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Introduction: Isolated talonavicular dislocations is rare because of the strong plantar ligamentous structures that support the joint. Isolated Fracture dislocation of talonavicular joint is very uncommon and controversy remains regarding the most appropriate management. Long term complications with these injuries are numerous and frequent. Ankylosis and equinovarus deformity can occur with incomplete talonavicular reduction. Even in these complex injuries, an early anatomic reduction and stable fixation can minimize the percentage of long-term impairment.

Discussion: A 18 -year-old lady with a history of right talonavicular subluxation following a motor vehicle accident and at the time of injury the fracture was reduced and put on above knee plaster of paris. However during her next follow up a month later we notice the talonavicular joint was subluxated. On X-ray and CT scan she sustained an isolated closed talonavicular dislocation. At this stage the patient complained of excessive pain on flexion and extension of the ankle joint. Open anterior approach between between tibialis anterior and extensor hallucis longus was performed. Following release of the navicular's ligamentous attachment between cuboid and cuneiform bones and plating using a triple X locking plate. Reduction was successful. Post op x-rays revealed a well reduced fracture.

Conclusion: Talonavicular dislocation is a rare condition. Such injury is caused by severe abduction or adduction of the forefoot and often associated with fractures of the navicular, cuboid, or calcaneus. Prompt recognition and early reduction is necessary to obtain optimal results and to avoid complications. Patient with delayed presentation needs open reduction and fusion. Long term predictable results are achievable with fusion allowing painless functional foot.