

## LISFRANC INJURY OF THE HAND? A RARE CASE OF ISOLATED DORSAL DISLOCATION OF THE LEFT SECOND TO FIFTH CMC JOINTS

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**Introduction:** Carpometacarpal (CMC) dislocation is a rare condition about 1% of hand injury. Delayed treatment can result in neurovascular injuries due to soft tissue edema and prolonged compression of vessels. We report a case of second to fifth CMC dislocation.

**Discussion:** A 21 years old gentleman fell with outstretched left hand from his motorbike and suffered a dorsal dislocation of the left second to fifth CMC joints. Clinical examination shows swelling and tenderness of the hand with intact neurovascular status and x-ray done suggestive of the finding. Closed manual reduction was attempted under sedation however dislocation was unstable. Closed manual reduction and k-wiring was done under general anesthesia. K-wire was kept for 6 weeks and post removal shows no sign of instability and 6 months post follow up shows full range of motion of the fingers and good grip strength.

**Conclusion:** This case is of interest as the mechanism of injury and anatomical structures allows for direct comparison to the Lisfranc injury of the foot. The direct force to the CMC joints and the rotation to the hand is a similar foot Lisfranc injury. However, no previous literature of treatment to support using of screws or plate as rigid fixation for the second and third CMC joint. In conclusion, CMC joint dislocation from 2nd to 5th finger is an extremely rare injury that needs thorough clinical and radiological assessment. Missed diagnoses are frequently reported. Hence, CMC joint dislocation should be considered on examination of traumatic hand injury.