

A RARE CASE OF TRAUMATIC POSTERIOR SHOULDER DISLOCATION: A CASE REPORT

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Introduction: Traumatic posterior dislocation of the shoulder without fracture in children is a very rare condition. In children, fracture of the proximal humeral epiphysis usually occurs before dislocation due to the relatively stronger ligaments compared to their epiphyseal plates. We present a rare case of isolated traumatic posterior shoulder dislocation in a 2-years-old child.

Discussion: A 2-years-old child was brought to the emergency department with right shoulder pain and limited range of motion after falling from a slide at the playground. Examination revealed tenderness over the right shoulder with pain upon abduction of the shoulder. Plain radiograph showed posterior displacement of the humeral head from the glenoid fossa. Closed manual reduction (CMR) was attempted twice under sedation but was unsuccessful. Subsequently, CMR was performed under general anesthesia by traction and external rotation of the humerus. Concentric and stable reduction was achieved and patient's shoulder was immobilized with an arm sling. At 6 months' follow-up, patient had painless full range of motion of the right shoulder. Posterior dislocation in this case is due to trauma on an outstretched arm, with the upper extremity flexed, adducted and internally rotated. It is easy to miss a posterior dislocation, however a high index of suspicion with inability to external rotate the shoulder coupled with radiographic evaluation to confirm the diagnosis.

Conclusion: Posterior dislocation of shoulder is extremely rare in children. Early diagnosis and prompt concentric and stable reduction is of paramount importance in achieving good prognosis for this condition.