

Chronic neglected elbow dislocation- our approach

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INTRODUCTION:

Chronic elbow dislocation is rare but we frequently encounter this injury in our population due to late presentation after weeks or months. Closed reduction is impossible after weeks due to the changes in osseous and ligamentous structures. This makes treatment of chronic elbow dislocation difficult and challenging.

REPORT:

A 40 years old lady, presented to us with a neglected unreduced left elbow for 3 months. She had fall at home with outstretched hand 3 months ago and went for traditional treatment and bandage. Her elbow had limited range of movements. There was not much pain. On examination, left elbow was swollen and deformed. Range of movement left elbow marked reduced 50-60° flexion and extension. Supination was limited 10° and pronation 30°. Neurovascular was intact. XR showed posterior elbow dislocation and CT scan showed no fracture but ossification within joint.

The patient underwent open reduction and reconstruction of lateral collateral ligament via medial and lateral elbow approach. Adhesions were released and fibrous tissues in the elbow joint and olecranon fossa were removed from lateral side. Medial release was also done and pronator mass was cut. Anterior capsule was released and triceps lengthening by V-Y plasty was done. Joint was reduced after all the soft tissue released. LCL was reconstruction using ipsilateral palmaris longus graft and sutured with fiber wire. Elbow was stable from 30–120° ROM. Ulnar nerve was transposed submuscular anteriorly. Post operative, elbow was immobilized with long posterior backslab. After 2 weeks she was put on hinged brace and movement was initiate in stages.



Figure 1: CT of posterior elbow dislocation

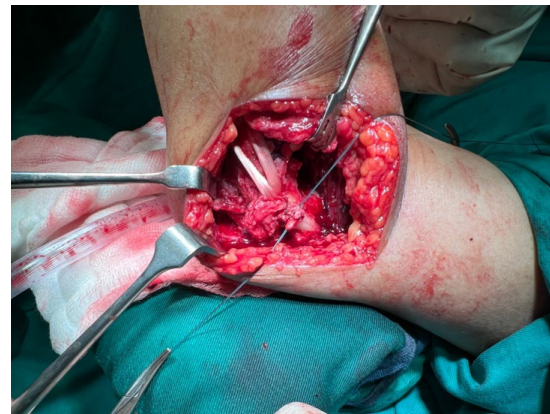


Figure 2: reconstruction of LCL ligament

CONCLUSION:

Treatment of chronic elbow dislocation is challenging due to complexity of injuries such as triceps contractures, collateral ligament contractures, anterior and posterior capsular contracture and extensive intraarticular fibrosis. Treatment modalities and stepwise approach should be tailored individual to get a concentric reduction and permit functional range of motions.

REFERENCES:

1. KW Donohue, TL Mehlhoff. Chronic elbow dislocation: Evaluation and management. J Am Acad Orthop Surg 2016;24: 413-423.