

# Transhumeral amputation: An unfortunate complication of transphyseal separation in a child with congenital insensitivity to pain and anhidrosis (CIPA)

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## INTRODUCTION:

Congenital insensitivity to pain with anhidrosis (CIPA) is a rare syndrome involving pain insensitivity, anhidrosis and mental retardation; a hereditary sensory neuropathy type IV (1). The condition leads to self-mutilation, bone fractures and recurrent episodes of fever. Absence of pain and anhidrosis poses a challenge to the diagnosis and healing of fractures.

## REPORT:

We reported a case of a 2 year old child with CIPA, suffering from a neglected transphyseal separation of distal humerus (Figure 1), undergone closed reduction and K- wiring of the distal humerus. Insensitive to pain and anhidrosis created an uphill post-operative care; leading to surgical site infection and osteomyelitis of the distal humerus. Multiple wound debridements, antibiotic spacer and external fixator was done over a 3 year period to salvage the limb. However, those attempts were futile as radiological findings (Figure 2) indicated worsening osteomyelitic changes leading to total resorption of the distal humerus. With worsening infection of the distal humerus and arduous wound care, transhumeral amputation was decided.

**Figure 1:**



Left elbow transphyseal separation with callus formation over the distal half of the humerus. Closed manual reduction and percutaneous pinning of distal humerus.

**Figure 2:**



Complete resorption of distal humerus.

## Conclusion

Early diagnosis of fracture in a patient with CIPA could have prevented the unfortunate transhumeral amputation.

## REFERENCES:

- 1) Daneshjou K, Jafarieh H, Raeskarami SR. Congenital Insensitivity to Pain and Anhidrosis (CIPA) Syndrome; A Report of 4 Cases. *Iran J Pediatr.* 2012;22(3):412-416.