

Bending It Back: A Case of Neglected Pilon Intra-articular fracture

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INTRODUCTION:

Fractures involving the intra-articular surfaces of the fingers especially the proximal interphalangeal joint are often associated with unsatisfactory functional outcome. Stiffness of the joint in particular being one of the most common complaint by patients apart from pain. Despite anatomical reduction and fixation, the clinical outcome will not improve without early mobilization.

REPORT:

We would like to report a case of a 36 year old right hand dominant male factory operator with a neglected closed intra-articular pilon fracture of his right ring finger. Patient initially sustained direct trauma to his right ring finger two months prior to his presentation which resulted in pain and swelling. Two months later upon our review, there were no bony tenderness and proximal interphalangeal joint (PIPJ) range of motion was limited to 30 degrees. X-rays showed a Pélissier's D2 fracture of the base of medial phalanx of the right ring finger.

He underwent a Hemi Hamate Arthroplasty of his Right Ring finger under WALANT on 23rd September 2022. Intraoperatively, an articular depression over the flexor aspect of the base of medial phalanx was seen with a neck of proximal phalanx angulation which may represent a missed fracture. A piece of hamate bone was excised and fixed to the base of medial phalanx with two 1.0mm headless screws after the fibrous tissue surrounding the defect was cleared. Articular congruence was assessed and a dorsal blocking k-wire was applied.

2 weeks post-surgery, the k-wire was removed, range of motion exercises initiated and 2 weekly review conducted over the course of 2 months and later monthly. At 3 months post surgery, his PIPJ range of motion was satisfactory.



Figure 1: 6 Weeks Post Fixation Radiograph



Figure 2: 6 Weeks Post Surgery

CONCLUSION:

Management of neglected PIPJ fractures are a challenge especially in terms of need for surgery, type of surgery in addressing joint stiffness. Early range of motion with restoration of the articular surface is highly advisable

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