

INTRAMEDULLARY NAIL IN TREATING SEGMENTAL FRACTURE OF ULNA: A NEW CHOICE OF FIXATION

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INTRODUCTION:

Adult forearm fractures require surgical intervention to restore axial and rotational stability. In current practice, the intramedullary locking nail of the ulna needs to be better favoured. Therefore, we report a case using intramedullary locking nails to treat our military personnel's forearm fractures.

REPORT:

We are reporting a case of 26 years old Malay gentleman, an RMAF football player.

He presented us with an alleged sports injury to his left forearm after being high-tackled and colliding during the football match. He sustained pain over his left forearm post-trauma and was brought to Hospital Angkatan Tentera Tuanku Mizan for further management. On examination, there was swelling and tenderness over his left forearm. The range of motion of his left wrist was good. On a plain radiograph of his left forearm, there was a segmental ulnar fracture with good alignment. He was initially treated with an above elbow back slab and planned for the intramedullary locking device of the left ulnar for definitive treatment. A closed reduction was made during the surgery before the intramedullary nail size 3.0 x 260mm (Trauhui System) was inserted. He was put on a tong splint for three weeks with his forearm in a neutral position postoperatively to prevent rotation at the fracture site. The fracture eventually united after six months postoperative, and he has achieved a full range of motion in terms of supination and pronation comparatively to his right forearm.

DISCUSSION:

The radius and ulnar constitute a complex articulation that permits supination and pronation of the forearm. The surgical technique is demanding. Nonetheless, the intramedullary method has less soft tissue injury and cosmetic

advantages and provides rotational stability with its locking features. The length of incision made is much less as compared to the plating technique.

CONCLUSION:

Ulnar interlocking nail is one of the options in treating a segmental fracture of the ulna and can provide comparable results to the plating technique with less soft tissue dissection.

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