

Images in medecine



Radial head anterior dislocation and ulna bowing in children



Mohammed Hajjioui^{1,&}, Najia Hajjioui²

¹Orthopedic Surgery and Traumatology, Military Hospital Moulay Ismail Meknes, Meknes, Morocco, ²Reeducation and Rehabilitation Medicine, Centre Hospitalier Universitaire de Fès, Fès, Maroc

[&]Auteur corresponding: Mustapha Azzakhmam, Department of Pathology, Faculty of Medicine, Mohamed V University, Rabat, Morocco

Received: 10 Apr 2020 - Accepted: 14 Apr 2020 - Published: 15 Apr 2020

Domain: Pediatric surgery

Key words: Radial head, monteggia, surgery

Image in clinical Medicine | Volume 2, Article 147, 15 Apr 2020 | 10.11604/pamj-cm.2020.2.147.22779

Available online at: https://www.clinical-medicine.panafrican-med-journal.com/content/article/2/147/full

© Mohammed Hajjioui et al PAMJ - Clinical Medicine (ISSN: 2707-2797). This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Images in medicine

An 11 year old boy is examined three days after going to the emergency room, in consultation with orthopaedic surgery for right elbow pain after a fall on the hand. The clinical examination revealed oedema of the external part of the elbow with a deficit in flexion and supination. X-rays revealed anterior dislocation of the head radial associated with plastic deformation of the ulna (A). It's about an equivalent type 1 Monteggia lesion according to the Bado classification. The line of Mubarak highlights the deformation plastic of the ulna on x-rays of profile. The treatment consisted of a closed orthopaedic reduction under sedation by external maneuvers

directed in the opposite direction of the plastic deformation of the ulna and dislocation of the radial head under scopic control which was satisfactory. Patient was immobilized in a long arm cast in 90 degrees of flexion and supination and followed closely radiographically for 2 weeks to ensure maintenance of radial head reduction (B). After four weeks the patient begins functional rehabilitation. The two-month check showed a painless stable elbow with symmetrical supination and flexion. Evolution is pejorative in the absence of an early reduction. A radial neuropathy can also occur in the longer term by compression, hence the importance of early diagnosis.





Figure 1: monteggia equivalent