

RADIAL HEAD REPLACEMENT : A HOSPITAL KEMAMAN EXPERIENCE

Nurul Qisti Ab. Razak¹, Zareze Abd Rahman¹, Mohd Hafizi Mohd Yusof¹, Zaharul Azri Mustapha @ Zakaria¹

¹Hospital Kemaman

Introduction: Radial head and neck fractures are common orthopaedic injuries. Goals in treating these injuries are to restore stability, preserve motion, and maintain length of radius. This case series report the early outcome of three radial head replacements done in our hospital.

Methodology: Radial head arthroplasty was performed on three patients in 2018 and 2019 using modular radial head prosthesis. First two cases were acute closed comminuted radial head fracture (Mason III), and the last case was a case of proximal radioulnar joint synostosis after failed fixation of complex elbow fracture dislocation. All surgeries were done via Kocher approach and elbow stability was confirmed intraoperatively

Discussion: All cases were reviewed clinically and radiographically. First case had similar elbow range of motion to uninjured elbow after one year; with DASH score of 8.3. Our second case was complicated with posterior interosseous nerve palsy post-operatively which resolved within the first 6 months. His DASH score was 10.0 at one year. Our last case's DASH score at 4 months post operation was 23.3. All radiographs showed congruent elbow joint, no evidence of early arthritis or implant wear.

Conclusion: Radial head prostheses have found a place in the treatment of radial head fractures and should be used when a radial head resection would likely to cause detrimental effects to the elbow. New modular designs have improved to better reproduce the anatomy of the proximal radius and are easier to insert. Anatomical radial head prosthesis effectively restores elbow stability and congruency in complex elbow injury. At our one year follow up, no major complications were identified in at least two of the cases. Follow up should be continued until at least two years post operation.