

## A RARE CASE FIXATION OF TRAUMATIC PISIFORM BONE DISLOCATION USING WALANT TECHNIQUE: A CASE REPORT

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**Introduction:** The pisiform is a sesamoid bone within the flexor carpi ulnaris tendon. Pisiform dislocation is a very rare wrist injury, thus there is currently limited literature available which describes its pathology and management. Current evidence suggests that immediate closed reduction and immobilization is indicated for an acute injury while the management of cases with delayed diagnosis or failed closed reduction is still debatable. Some suggested an open or closed reduction with wires of the unstable pisiform in its anatomical location whereas others advocate for its excision instead. Early diagnosis and reduction is paramount to prevent sustained difficulties in performing activities of daily living.

**Discussion:** We present the case of an 18 year old right hand dominant male, who was brought to the emergency department of Hospital Tuanku Ja'afar Seremban after a motor vehicle accident. Upon arrival, he complained of pain over the right wrist predominantly over the ulna aspect. He sustained a closed fracture distal end right radius with pisiform dislocation. The initial management involved closed reduction and cast application in the emergency department, which however non successful. The patient subsequently underwent an open reduction and k wire of pisiform with plating of radius done under Wide Awake Local Anesthesia & No Tourniquet (WALANT) technique. Three months post operatively, the patient was reassessed using the Mayo Modified Wrist Scoring in which he scored 95% which signifies excellent results.

**Conclusion:** A differential diagnosis of pisiform dislocation should be considered in a patient that presents with pain over the ulnar aspect of the wrist. In this case report, the authors observed that careful open reduction and pinning of the pisiform bone alone could have excellent functional results with rapid restoration of stability and strength within 3 months with an excellent Mayo Modified Wrist Scoring.