

Disrupted But She's Unaffected – Isolated Volar Druj -A Case Report

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INTRODUCTION:

Isolated volar dislocations of the distal radioulnar joint (DRUJ) are reported as rare with only sporadic case reported in the literature. Most of the cases of DRUJ dislocation occur when ulna bone dislocates in dorsal direction¹. We report a unique case of volar DRUJ dislocation successfully treated surgically with good outcome.

REPORTS:

A 48 year old right hand dominant staff nurse sustained trauma over her non dominant hand following fall with outstretch hand. She complained of pain, swelling and limited motion over her left wrist. At first presentation she was treated as soft tissue injury over left wrist. She was discharge with oral analgesic for her pain relief. she presented again with increasing pain over left wrist. Physical examination revealed loss of prominence dorsal ulna head and pain over ulna aspect upon palpation. Initial plain radiograph showed volar dislocation of ulna bone without any fracture. Diagnosis of close volar DRUJ was made. A closed reduction and cross pinning DRUJ was then performed at 6 weeks. Postoperative care with below elbow cast with early forearm rotation at 6 weeks. She was seen again at 2 month, she has no wrist pain and preserved wrist and forearm motion.

Figure 1: initial radiograph of left wrist

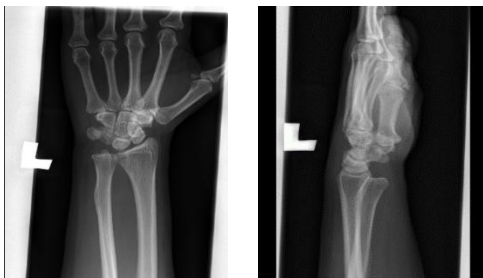


Figure 2: post operative k wire left DRUJ.

CONCLUSION:

Volar dislocation of the DRUJ is considered rare, this injury often been overlooked or misdiagnosed. Approximately 36 % of cases experience delayed or missed diagnoses². Every healthcare practitioner should pay attention typically to those with any forearm or wrist injury. A thorough examination and xray evaluation could help to detect any dislocation.

REFERENCES:

1. Mulford JS, Axelrod TS. Traumatic injuries of the distal radioulnar joint. Orthop Clin North Am 2007
2. O'Malley O., Brown O.C., Duncan L., Cheung G., Stevenson H.L., Brown D.J. Isolated volar dislocation of the distal radioulnar joint: a case series and systematic review.