

Perilunate Fracture-Dislocation; Clinical Image

Reza Minaei Noshahr¹, Seyyed-Mohammad Qoreishi¹, Ehsan Hakimi¹, Seyyed Morteza Kazemi^{1,2}, Siamak Shabani¹, Peyman Zia Dehkordi¹, Naser Ghanbari², Mehdi Aarabi^{3,4} and Seyyed-Mohsen Hosseini^{1,3*}

¹Bone, Joint and Related Tissue Research Center (BJRTrc), Shahid Beheshti University of Medical Sciences, Tehran, Iran

²Associate Professor of Orthopedic Surgery, Shahid Beheshti University of Medical Sciences, Tehran, Iran

³Golestan Rheumatology Research Center, Golestan University of Medical Sciences, Gorgan, Iran

⁴Department of Orthopedic Surgery, Toronto East General Hospital, 825 Coxwell Avenue, Toronto, ON M4C 3E7, Canada

*Corresponding author: Seyyed-Mohsen Hosseini, Orthopedic Resident, Bone, Joint and Related Tissue Research Center (BJRTrc), Shahid Beheshti University of Medical Sciences, Tehran, Iran



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ABSTRACT

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Presentation

Perilunate fracture dislocations are rare with seven percentage of wrist pathologies but many of these injuries are not diagnosed well so that roughly 25% of perilunate dislocations being missed in clinics (Figure 1). The importance of diagnosing such injuries is highlighted by serious complications consists of chronic carpal instability, median nerve injury, lunate avascular necrosis, complex regional pain syndrome (CRPS) and posttraumatic wrist arthrosis [1-3]. Here, we report a case of a 42-year-old male presented to

our supreme orthopedic center, Akhtar Hospital, with right hand complex perilunate fracture dislocation treated by standard percutaneous pinning and dorsal screw fixation of scaphoid (Figure 2). The increased risk of complications with, performing an emergency salvage surgery in the acute setting for perilunate fracture dislocations could avert a patient from next repetitive operation. Our case presents a rare case of orthopedic emergency and indicate the importance of prompt diagnosis and intervention of perilunate injuries.



Figure 1: AP and lateral images of the initial radiographs taken in the secondary hospital showing perilunate dislocation and carpal misalignment beside scaphoid fracture.



Figure 2: postoperative x-ray illustration scaphoid screw fixation and appropriate alignment of the carpal bone.

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