

Elbow arthroscopy following trauma: two case reports

Márcio Oliveira¹, Ricardo Pereira¹, Moisés Ventura¹, Luis Miragaia¹, André Sarmento¹, Pedro Canela¹
1. Centro Hospitalar Vila Nova de Gaia/Espinho, Portugal

INTRODUCTION

Arthroscopy of the elbow has originally limited applications, mostly because of the small size of the articulation and its proximity to neurovascular structures. Over the past decades, it has become a safer and more effective procedure, with a better understanding of elbow anatomy, better arthroscopic equipment and surgical technique. The most common indications are: removal of loose bodies, synovectomy, débridement, capsular release and treatment of osteochondritis dissecans.

AIM

We report two cases of arthroscopic treatment of elbow, following sport related trauma in young male athletes.

METHOD

We describe the clinical, radiological and arthroscopic treatment results of two elbow fractures. We also show the images and describe the procedure.



Fig. 1
CT with Mason type II radial head fracture, with anteromedial fragment, associated with flexion block.

RESULTS

A 20 and 24-year-old male patients injured their right and left elbow respectively, following a fall playing football and cycling. They presented in our emergency department with pain and swelling of the elbow and functional disability. The x-ray demonstrated a Mason type II fracture in both. An CT was performed basis on functional impairment with flexion block, and the result was the presence of a major fragment and some milimetric intrarticular loose bodies (Fig.1). Therefore, an arthroscopic procedure was performed 2 weeks after initial injury. We removed the loose bodies and performed sinoviectomy, with an immediate improvement of the mechanical restriction (Fig 2 and 3). An active assisted range of motion exercise was initiated promptly. At 8 weeks postoperatively the patients were capable of full range of motion, without pain and at 12 weeks they returned to previously activity level.

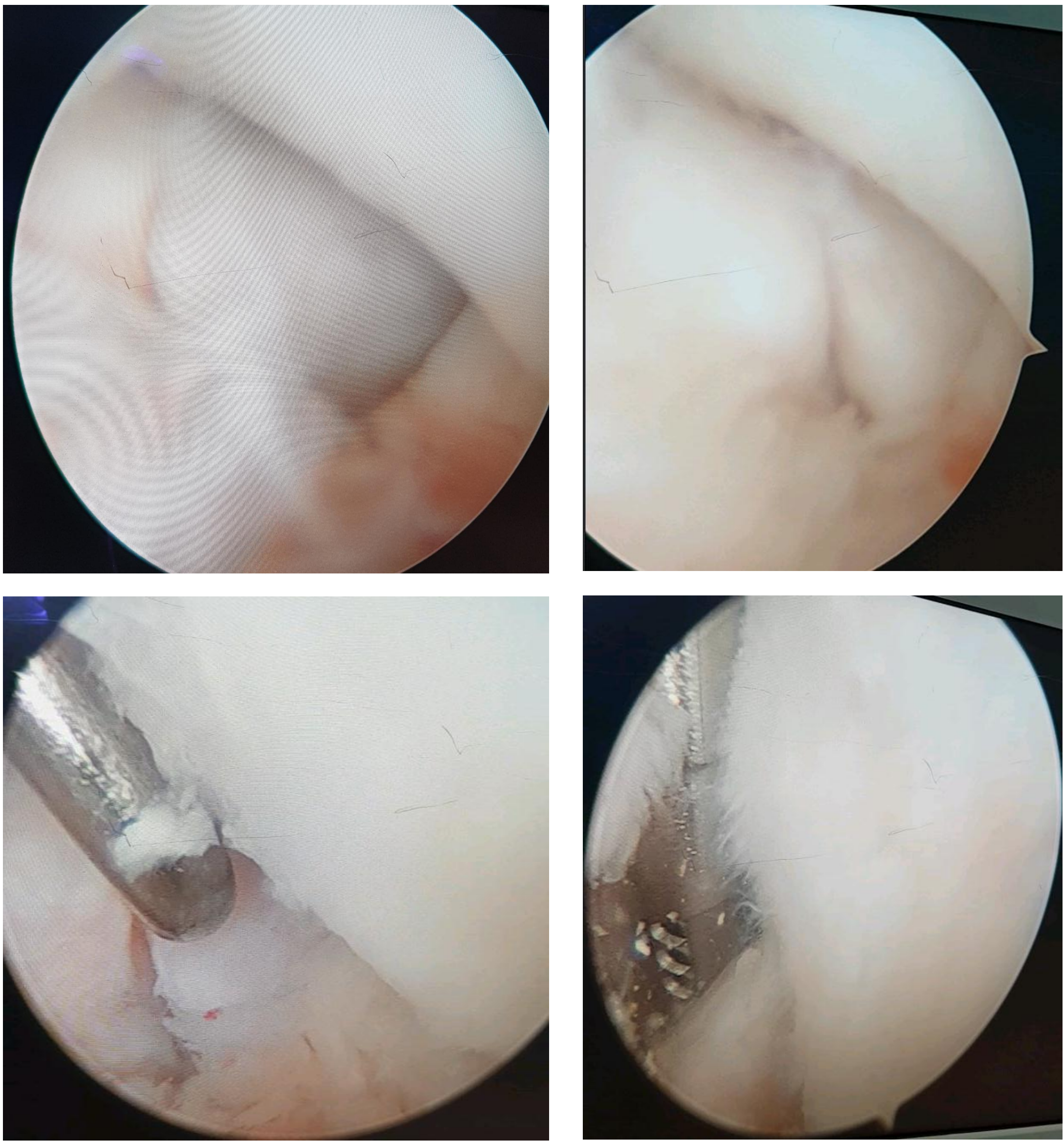


Fig. 2
Arthroscopy procedure with identification of the major fragment after debridement. Manipulation of the fragment with tools and removal.



Fig. 3
Major fragment with 13mm.

CONCLUSIONS

Elbow arthroscopy is an effective procedure for removal of traumatic intra articular loose bodies that cause mechanical symptoms, as well as a diagnostic tool to evaluate intra articular lesions following trauma. We believe that a prompt rehabilitation is crucial to obtain better results.

REFERENCES

1. Malin Wijeratna et al. Arthroscopic radial head excision in managing elbow trauma. International Orthopaedics . 2012;
2. Ilias Galanopoulos et al. Single extremely large loose body in olecranon fossa in a young patient. BMJ. 2013;
3. Les Roger Folio eta al. Loose Body in Elbow of a Baseball Player: Arthroscopic/Radiologic Correlation. Radiology Case Reports. 2006.