# Pediatric Orthopedic Clinical Case Discussion (Upper limb) Dr. Omar Samarah

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3 yr old boy, RTA victim, presented 2 weeks later



# 3 yr old boy, RTA victim, presented 2 weeks later

2 Weeks later after presentation



# 3 yr old boy, RTA victim, presented 2 weeks later

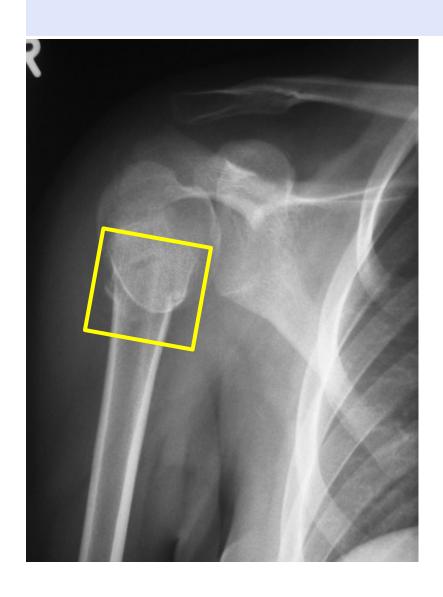




14-year-old girl (competitive gymnastics); hx of falling down on Rt shoulder



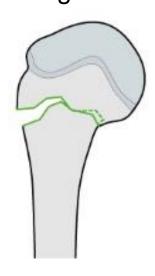
What do you see?



#### Classification

Where is the lesion?

Do we need more investigation?



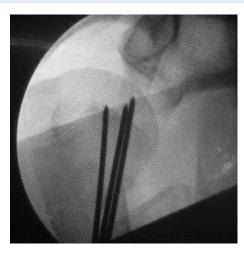
# 13-year-old girl; no patient history available



How would you treat this?











This is what was done
Are you happy?
What's not so optimal?

#### Proximal humerus fracture

- \* The proximal humeral growth plate accounts for about 80 % of the growth of the entire bone .
- \* It closes between 16 and 19 years of age.
- \* For these reasons, the remodeling potential in the proximal humerus is extraordinary, allowing even the most displaced fractures to be treated conservatively.
- \*Surgery is exceptional

# 1-day-old new born boy



What are your thoughts about this fracture?

# 1-day-old new born boy



How would you treat this?

# 1-day-old new born boy



How would you treat this?

- 1. Leave it alone
- 2. Closed reduction &cast
- 3. Only immobilization
- 4. Closed reduction & retrograde ESIN
- 5. ORIF & plate

# 1-day-old new born boy





This is what was done

Are you happy?



12 days

# 1-day-old new born boy



Follow up

Are you happy?



5 months

6-year-old boy, fall from a tree, swollen elbow





What are your thoughts about this fracture?

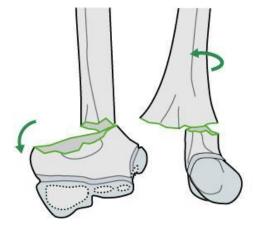
Case 3

#### 6-year-old boy, fall from a tree, swollen elbow





## Classification



6-year-old boy, fall from a tree, swollen elbow



How would you treat this facture?

#### 6-year-old boy, fall from a tree, swollen elbow



# How would you treat this facture?

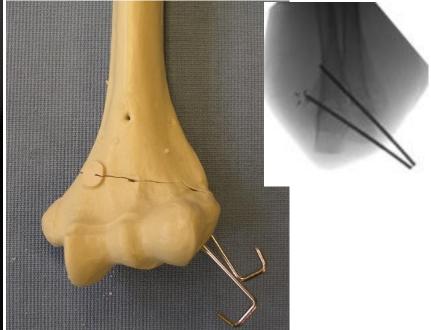
- Open reduction any kind of wiring
- Closed reduction and crossed K-wires
- Closed reduction and radial divergent K-wires
- Closed reduction and cast
- ESIN
- Radial ExFix

#### 6-year-old boy, fall from a tree, swollen elbow



# This is what was done

Closed reduction and divergent radial wiring



#### Supracondylar elbow fracture

- •Young children, ages 3 years to 7 years most common.
- •Neurovascular compromise upon presentation in less than 10%
- •Elbow pain, tenderness, swelling, decreased range of motion are standard findings
- Look for antecubital ecchymosis, skin puckering, forearm swelling to indicate a more severe injury
- •A detailed neurologic examination is performed in all patients to include both motor and sensory function
- •The perfusion status of the extremity should be noted.
- Things to look for on imaging studies:
- •AP radiograph Baumann's angle, assess medial comminution
- •Lateral radiograph anterior humeral line, posterior fat pad sign

10 year old boy, fall from a tree, swollen forearm



10 year old boy, fall from a tree, swollen forearm



#### 10 year old boy, fall from a tree, swollen forearm

At 5 weeks



#### 10 year old boy, fall from a tree, swollen forearm

One year after removal



10 year old boy, football injury





# 10 year old boy, football injury





10 year old boy, football injury





## 10 year old boy, football injury

X-ray 4 weeks later





#### Fractures of the radius and ulna

- \* Fractures of the radius and ulna account for the most common fractures in children under 14 years old.
- \* Fractures of the radial shaft are the third most common fracture in children, after distal radius and supracondylar humerus fractures.
- \* The distal radial and ulnar physes account for approximately 80% of longitudinal forearm growth.
- \* On average, the distal radial and ulnar physes close at age 17 in girls and 19 in boys, however, physiologic growth is likely complete prior to radiographic physeal closure.







2 yr old girl, Fall on outstretched hand

Follow Up 3 weeks from fracture



# 2 yr old girl, Fall on outstretched hand

Missed for 3 months

















#### Lateral condylar fracture

- Second most common fracture pattern about the elbow in pediatrics
- Most commonly due to fall from height onto outstretched arm
- •Can often be missed on radiographs, internal oblique elbow x-rays are critical
- •Non-operative treatment must be followed closely to monitor for further displacement
- Articular reduction is the primary goal in surgical intervention of displaced fractures
- Complications can be relatively common and may be significant