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Surgical treatment of distal humerus fractures - type C: wire with brooches and plates

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Introduction

Distal humerus fractures (DHF) are associated with many problems such as comminution, osteoporosis. The majority of DHF (96%) have a complex pattern involving both columns, and the articular surface (AO B and C). FPH represents 1-2% of all adults fractures.

Material and methods

We studied the patients with FPH type C who were treated consecutively in the **Department of Hand Surgery and Microsurgery of the Clinical Hospital of Traumatology and Orthopedics,** Chisinau during 2018-2019. The final results were determined using the DASH and MEP score. All results were presented as mean ± standard deviation (± SD)

Results

According to AO, DHF were determined 35 cases of type C (C1 -26; C2-4; C3-5). **The gender ratio was 2.5: 1 (25:10) with a predominance of females.** In type C it was the main objective for obtaining triangular stability with the restoration of three columns and brooches, screws and tension bands were used in 27 cases, orthogonal plating or parallel plating in 8 cases. All fractures healed and the radiographic joint was observed for an average of 3 months. It was possible to investigate **MEP and DASH scores in 15 patients with a mean of 89 ± 1 and 35 ± 2**.

Conclusions

The result of plate osteosynthesis in DHF leads to high consolidation rates, with acceptable results of DASH and MEP scores.

Keywords

distal humerus, anatomical reduction, osteosynthesis

Purpose

To evaluate the intermediate term results (follow up of two years) of DHF type C according to data from medical records, type of implant used in fracture fixation, specific parameters of elbow postsurgical treatment.

25/10

Clinical case: 19ys, f.