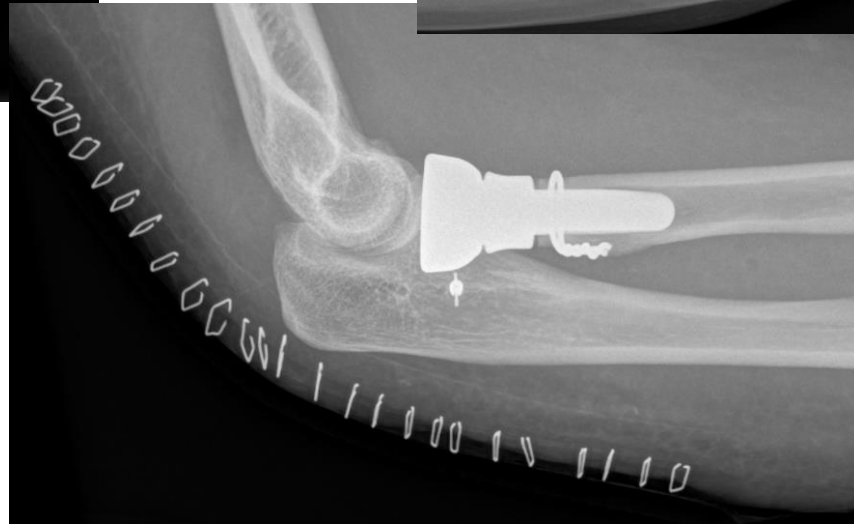
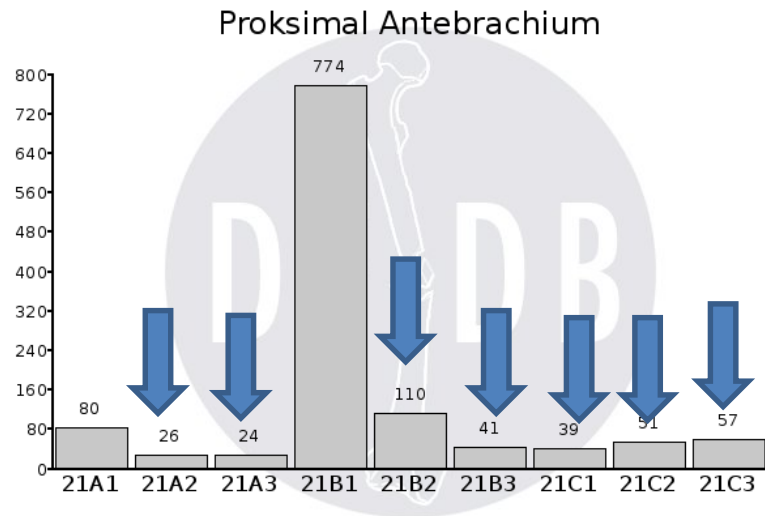


Caput Radi-Fix, Replace or Resect



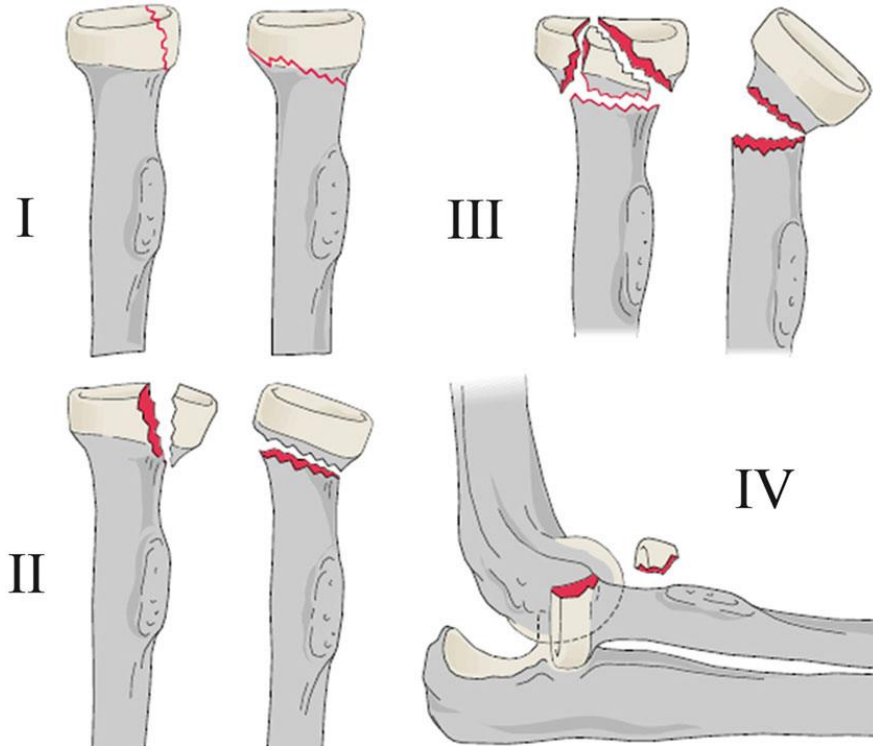
frakturtyper



21 proximal

21-A1	21-A2	21-A3	21-B1	21-B2	21-B3	21-C1	21-C2	21-C3
21-A extraarticular fracture			21-B articular fracture			21-C articular fracture of both bones		
21-A1 ulna fractured, radius intact			21-B1 ulna fractured, radius intact			21-C1 simple		
21-A2 radius fractured, ulna intact			21-B2 radius fractured, ulna intact			21-C2 one artic. simple, other artic. multifragmentary		
21-A3 both bones			21-B3 one bone articular fracture, other extraarticular			21-C3 multifragmentary		

Mason klassifikation



- Type I
- Konservativ behandling
- Type II
- Konservativ/operativ
- Type III/IV
- operativ

Treatment options

Mason type II

- Conservative – immobilization ?
- Operative
 - Fixation - ORIF
 - Screw
 - Biodegradable
 - Plate
 - Excision
 - Replacement



Conservative Treatment

- Mason II
- Systematic review 717 studies
- 9 retrospective case series (level IV) describing 224 patients included
- Nonoperative treatment was successful in 114 of 142 patients (80%) pooled from the studies (42% to 96% success in individual studies).
- Open reduction and internal fixation was successful in 76 of 82 patients (93%) (81% to 100% success in individual studies).



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Mason type II/III/IV

- Operative options

- Fixation - ORIF

- Screw
 - Biodegradable
 - Plate

- Excision

- Replacement

- Aim

1. Stability

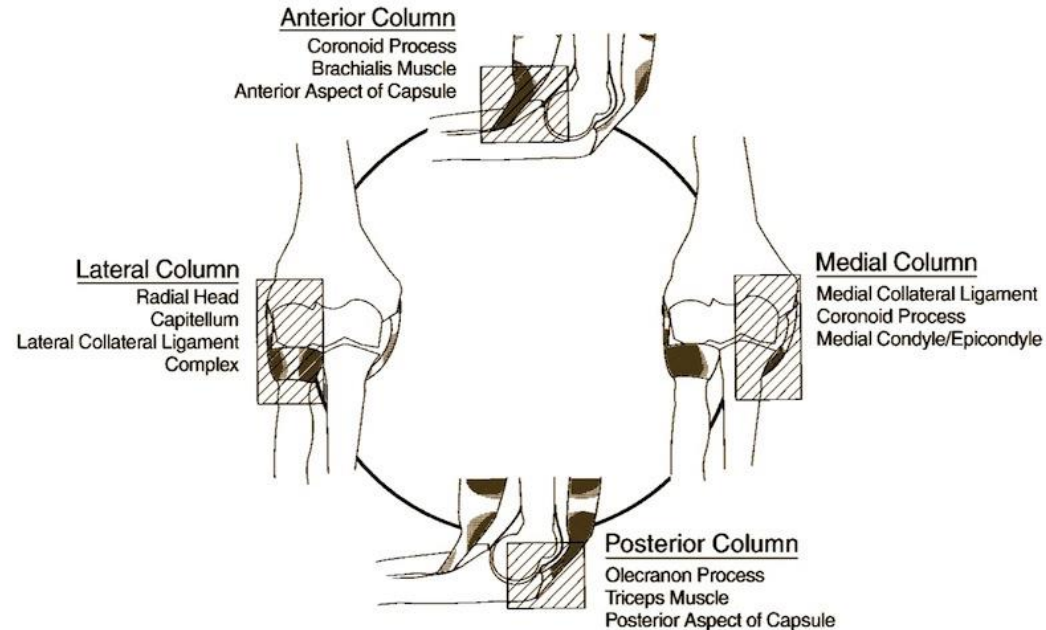
2. Painfree

3. Strong

Most patients has reduced range of motion, but good function

Ligaments and capsula

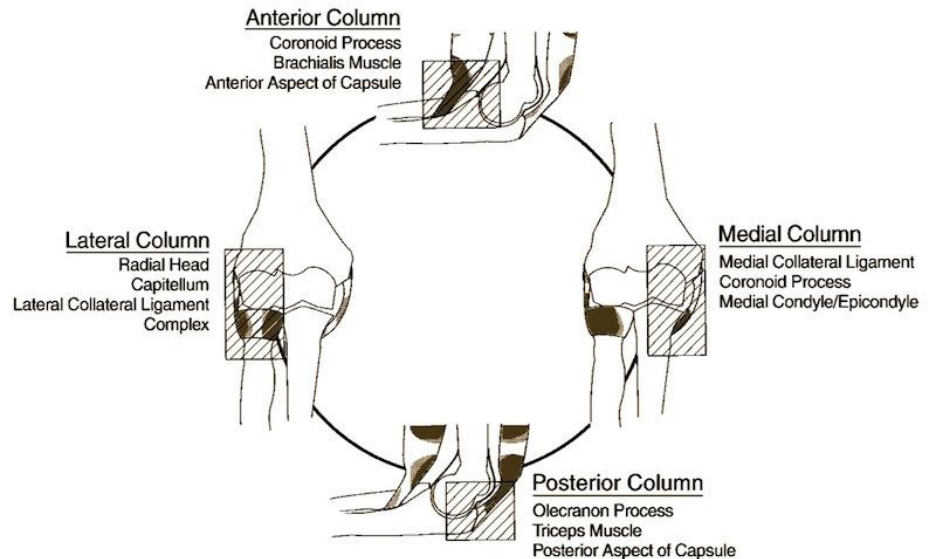
- Must be capable of:
- Handling de-tach and re-attach of ligaments
- Reconstruction of ligaments
- Suture of anterior capsula
- Osteosynthesis and prosthesis surgery



Surgical strategy

- Lateral position
- Dorsal approach
- Detach annular ligament
- ORIF – lag screws
- Replace/Resect
- Re-fixation annular ligament
 - Anchor + fiberwire

- Focus on stability



Mason type III Resect.



CT





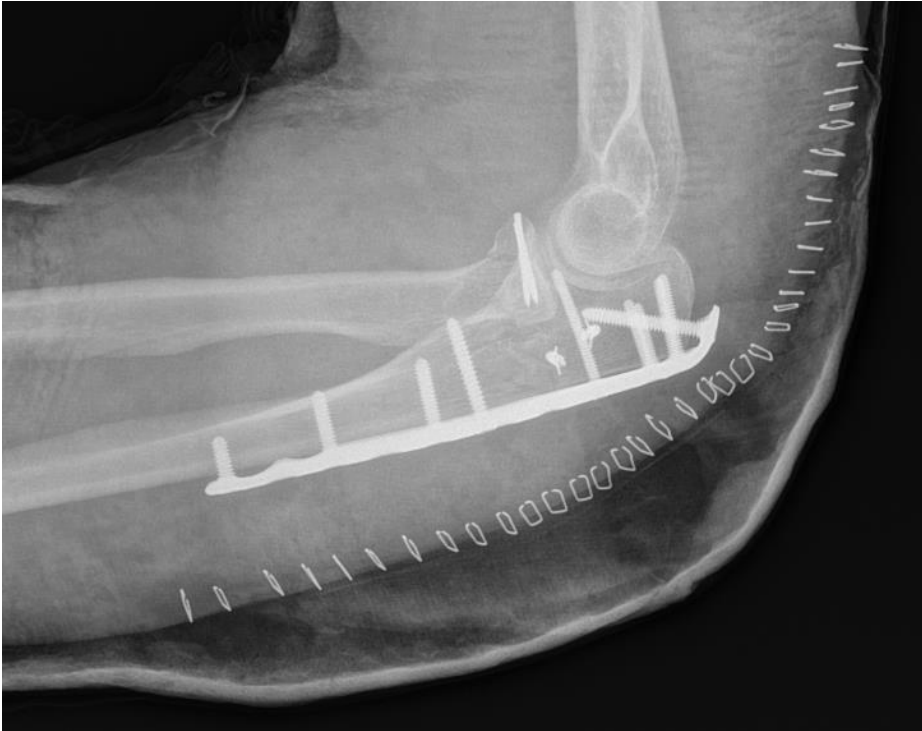
Mason IV-Fixation



CT



Post-op



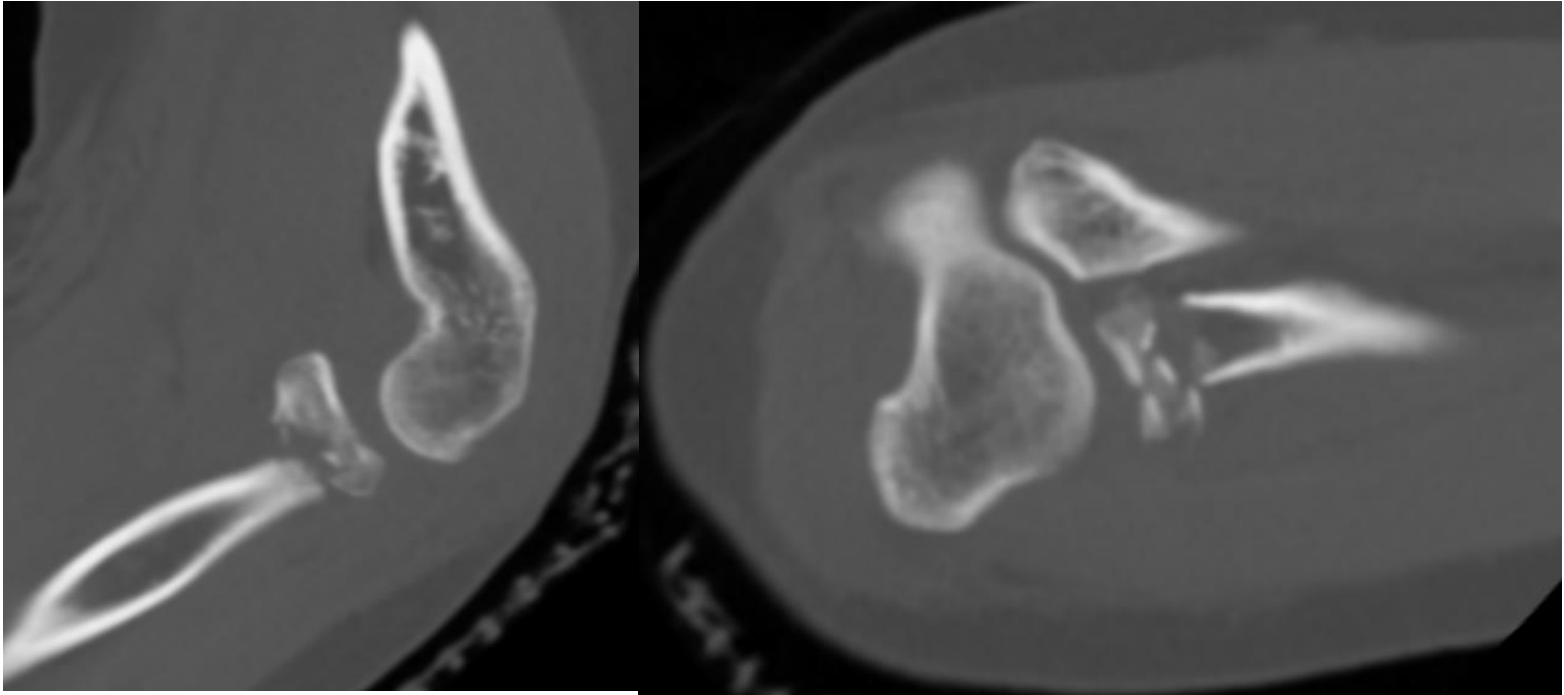
Mason IV - replace



After reduction

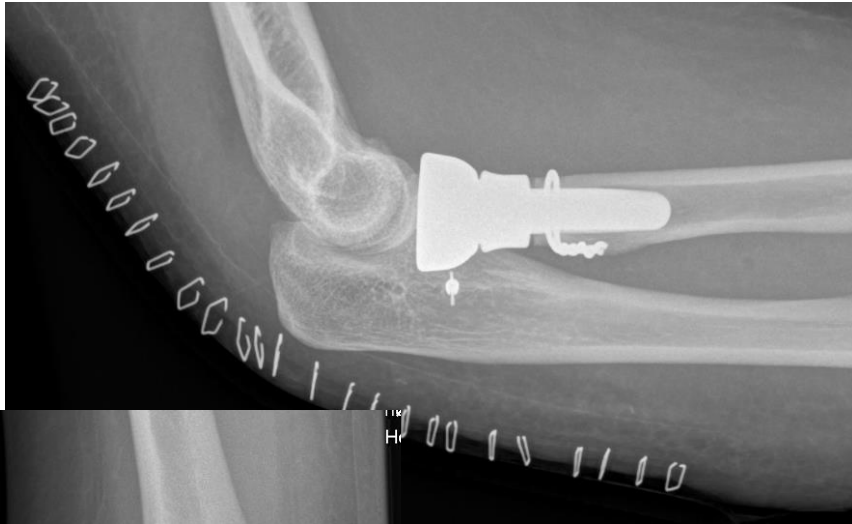


CT Scan is a must in complex elbow fractures



Post op

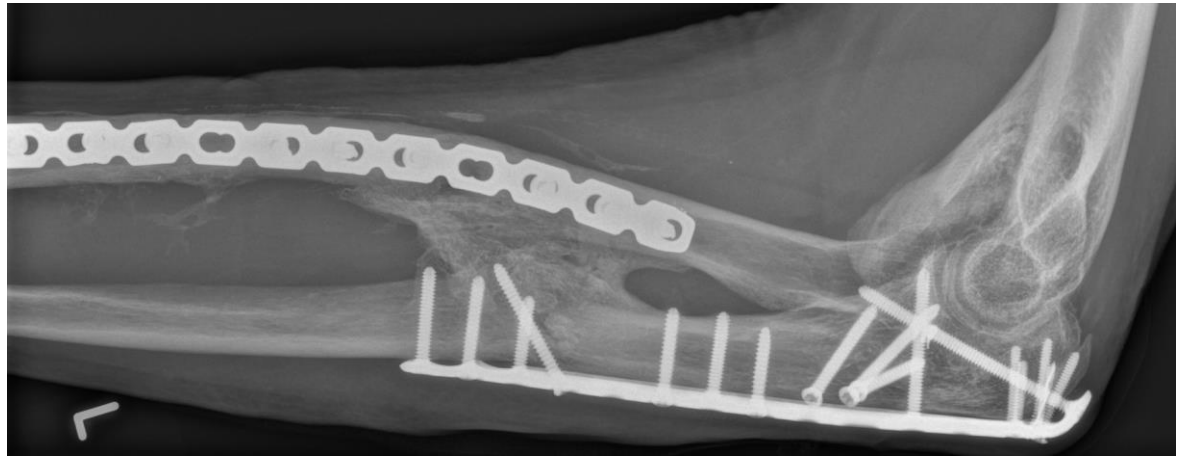
3 months



Heterotopic ossification

- In complex-combination fractures.

- Be aware of heterotopic ossification



- Prevent with N.S.A.I.D

Take home message

- Mason type 1- conservative.
- Mason type II/III/IV
- Always CT for planning
- Surgical goal is stability
- And a painfree strong elbow
- Complex surgery

