# (Complex) Distal Humerus Fractures

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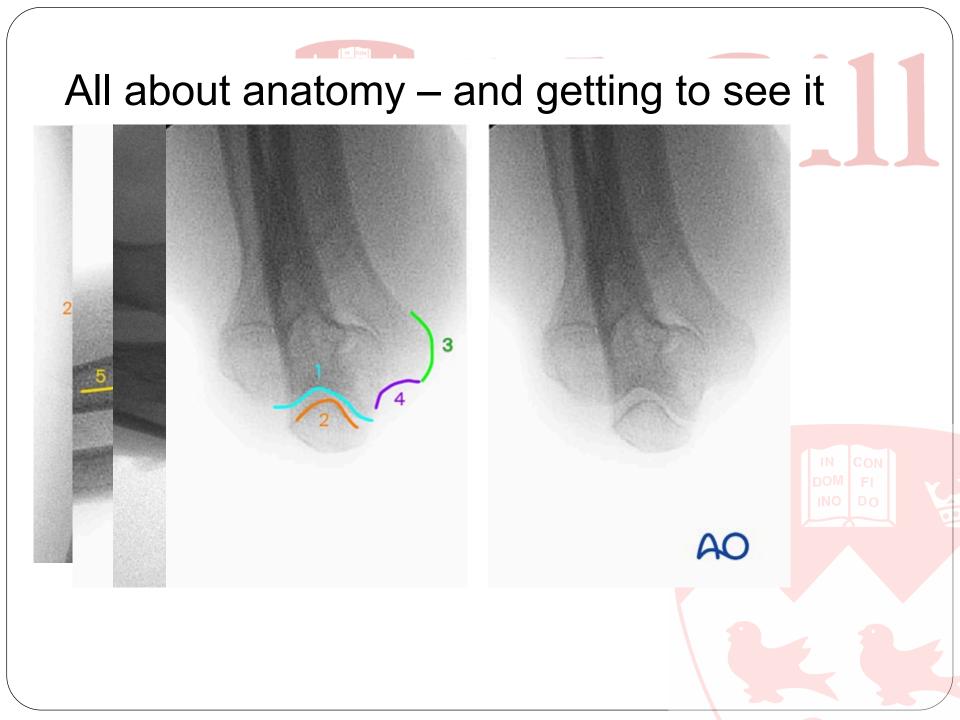
- Canadian Journal of Surgery, OTA Patient Portal
- OTA International, J Ortho Trauma
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### Two things make these challenging

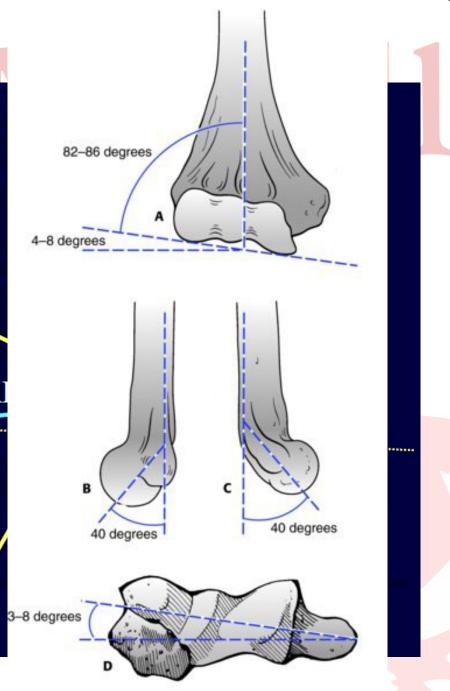
# **×**Biology

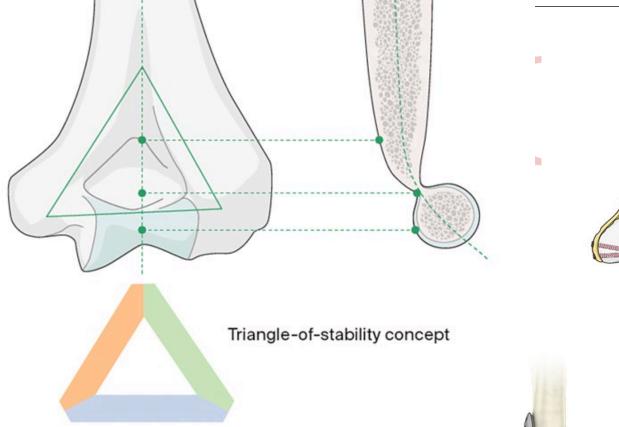
### ×Anatomy



# Anatomy

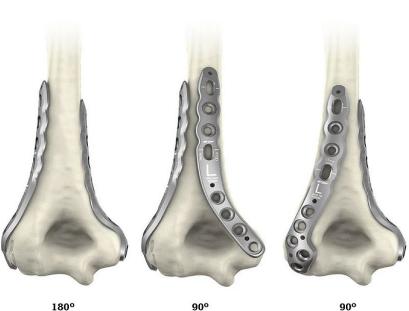
- Hinged joint with single axis of rotation (trochlear axis)
  - At bottom of virtual distal humeral triangle
- Trochlea is center point of Al with a lateral and medial
- Trochlear axis compared to longitudinal axis is 4-8 degrees in valgus

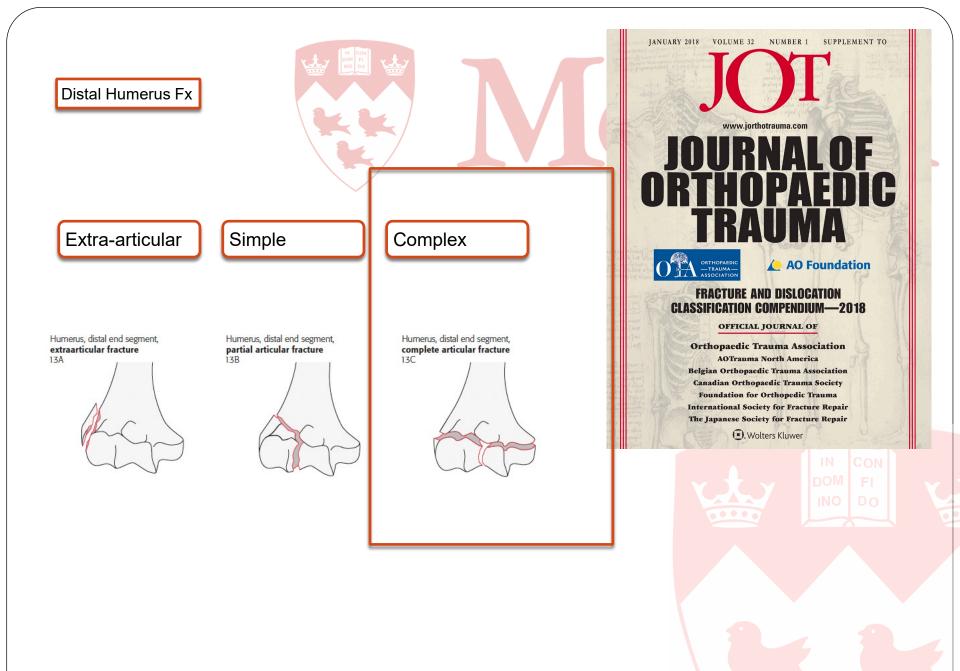


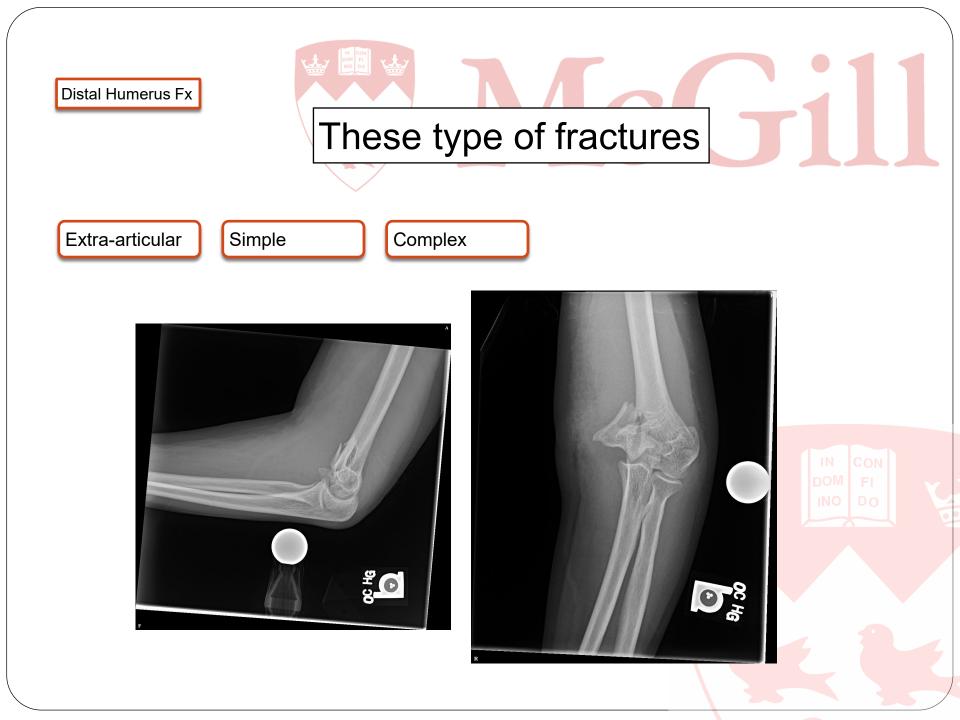


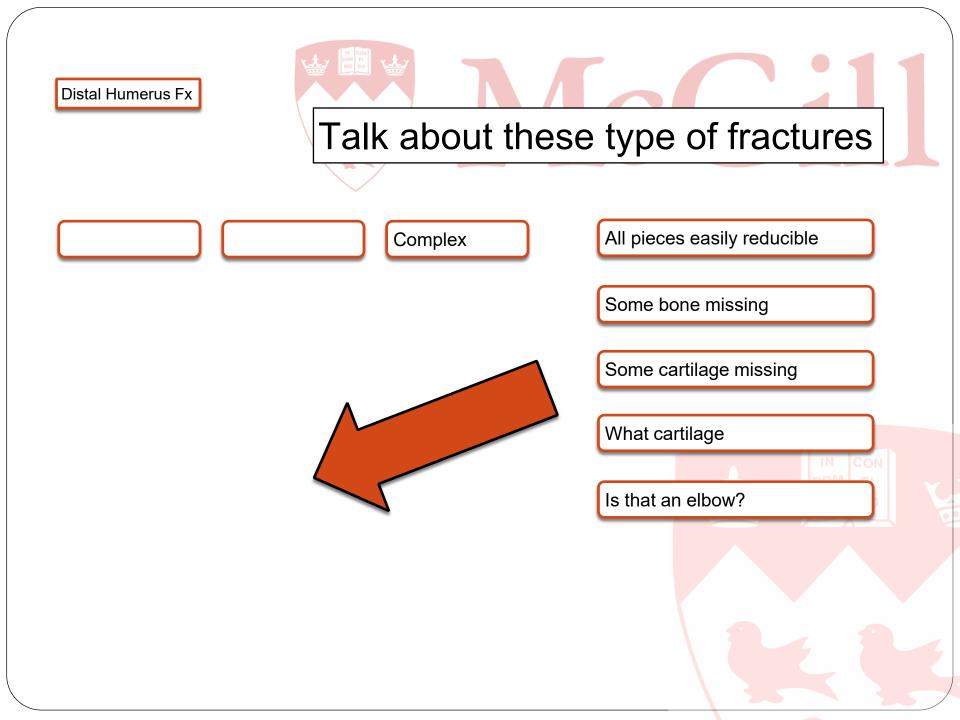
surgical fixation of a distal humerus fracture

means anatomic articular reduction and rigid fixation









All pieces easily reducible

Some bone missing

Some cartilage missing

What cartilage

Is that an elbow?

#### **Options**

#### **Approaches**

What to do with the pieces

Where to find new pieces

What pieces of metal to use

# Goals are the same

All pieces easily reducible

Some bone missing

Some cartilage missing

What cartilage

- Implants determined by fracture pattern
- USE just as much as needed to permit early ROM with minimal soft tissue stripping
- "Bag of bones" technique
  - Rarely indicated if at all
  - Distal impacted fractures in elderly with early ROM

# Approaches

All pieces easily reducible

Some bone missing

Some cartilage missing

What cartilage

- Been 25 years since I performed a chevron osteotomy
- 50% hardware removal rate or unhappiness factor of 10
- Makes it hard to do revision TEA
- So, I NEVER do it
  - I know never say never

# Approaches

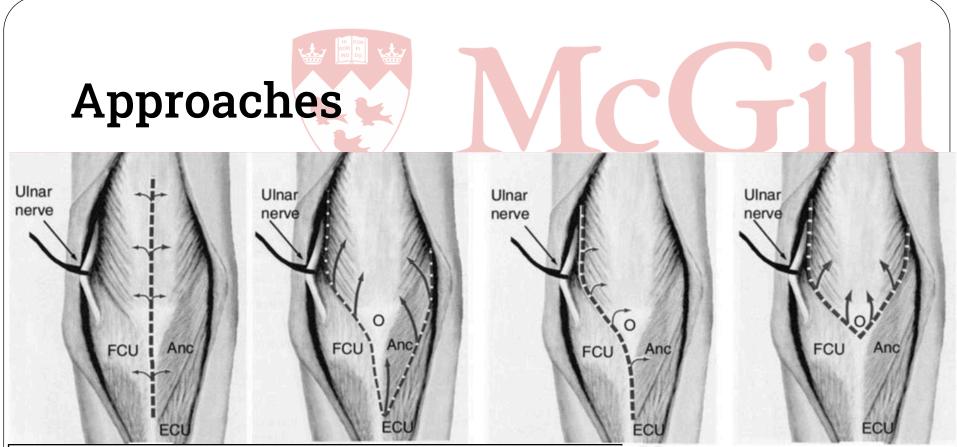
All pieces easily reducible

Some bone missing

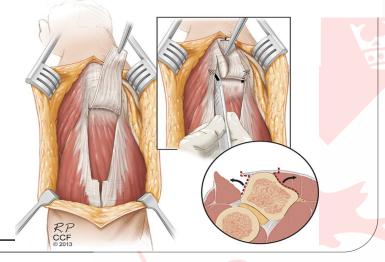
Some cartilage missing

What cartilage

- Reduction seems to influence outcome in articular fractures
- Exposure affects ability to achieve reduction
- Many different exposures give good to complete visualization of articular surface
- Choose the exposure that fits the fracture pattern or your experience



Triceps Split TRAP Flap Morrey Medial Approach Olecranon osteotomy Para-tricepital Tongues



# Approaches



### **TRAP Flap**

- Posterior approach
- Flap lifted off ulna to about 15 cm distal to joint
- Preserve triceps to anconeus soft tissue
- Repaired through 3 ulna holes with FibreWire

# Approaches



# No.

Lateral decubitus position Prone positioning possible Supine position OK? as well

- Arm hanging over a post
- I prefer a sterile bump in case convert to TEA
- Sterile tourniquet better- non-sterile in long arms maybe
- Midline posterior skin incision

# Approach

All pieces easily reducible

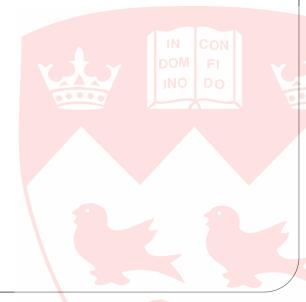
Some bone missing

Some cartilage missing

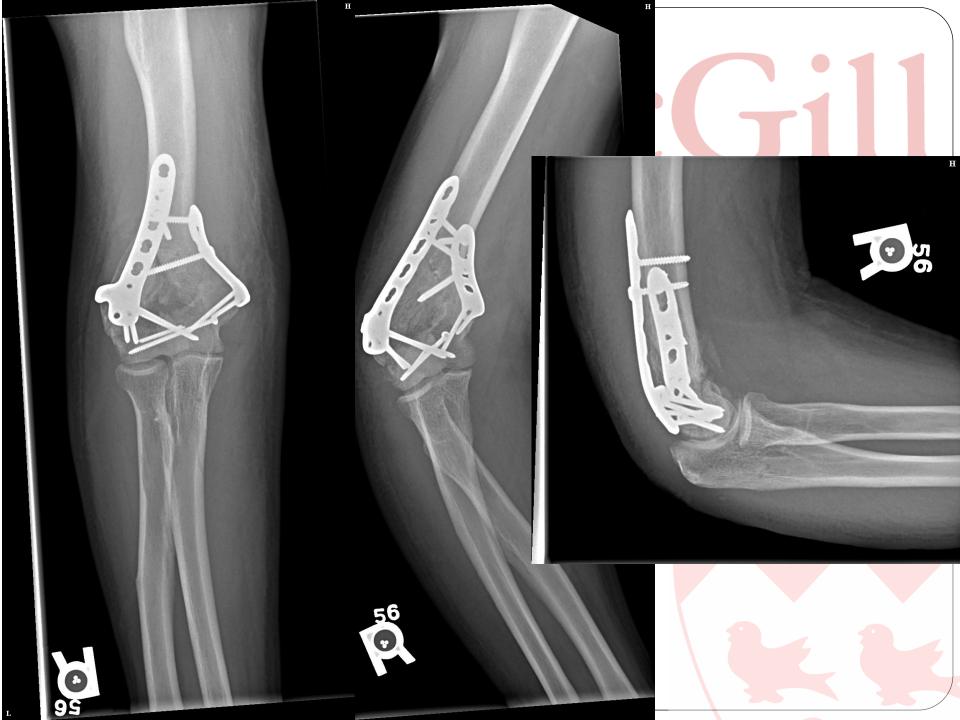
What cartilage

Is that an elbow?

### Split Paratricepital







# Approach

All pieces easily reducible

Some bone missing

Some cartilage missing

What cartilage

Is that an elbow?

TRAP



# Approach I Use?

All pieces easily reducible

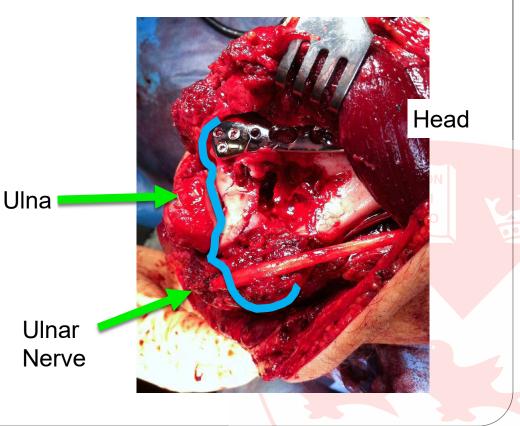
Some bone missing

Some cartilage missing

What cartilage

Is that an elbow?

Osteotomy 25% Olecrenon after exposure Can take down LCL – 100% of joint and operate in front



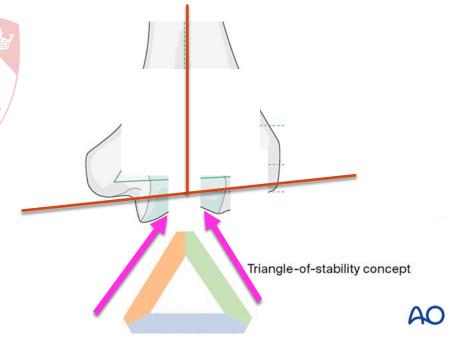
# Principles

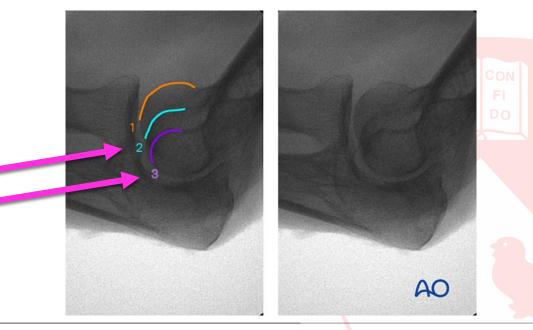
All pieces easily reducible

#### Some bone missing

#### Some cartilage missing

What cartilage





# Examples

All pieces easily reducible

Open Fracture

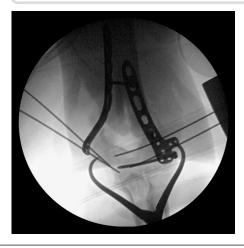
Fibula / allograft

Some bone missing

Would do this differently now

Some cartilage missing

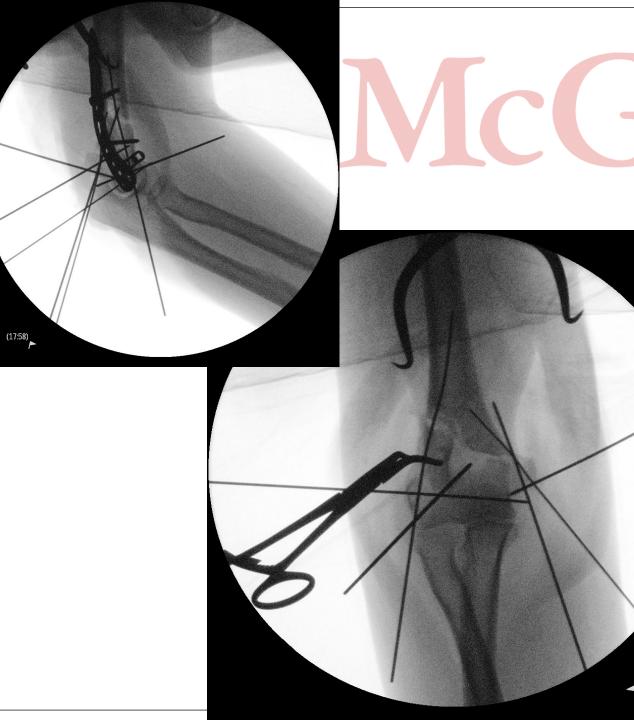
What cartilage



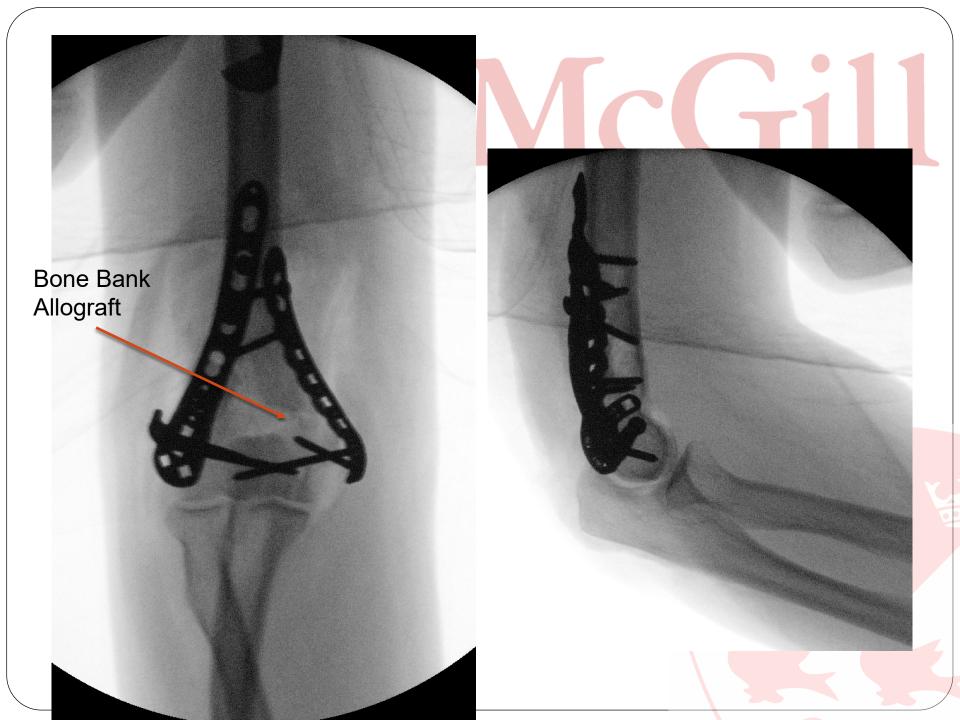
# Young patient







3 (17:45)











# Examples

All pieces easily reducible

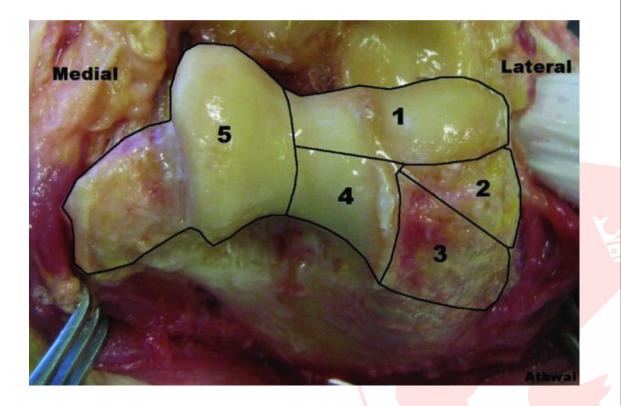
#### Realize where it is missing from

**Ring Classification** 

#### Some cartilage missing

Some bone missing

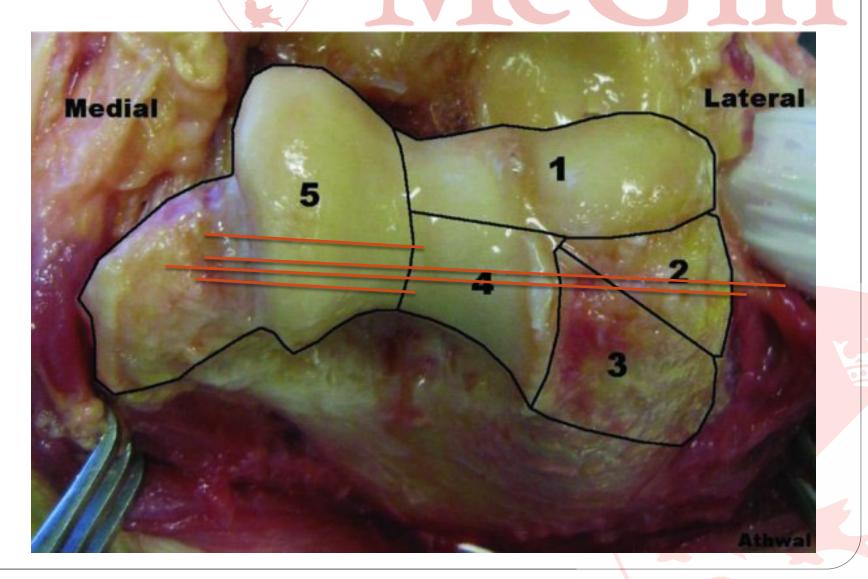
What cartilage

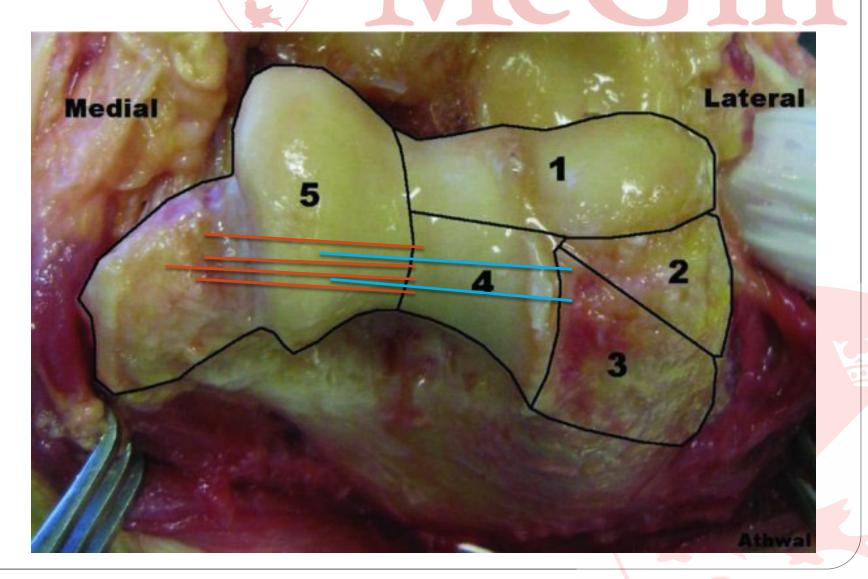


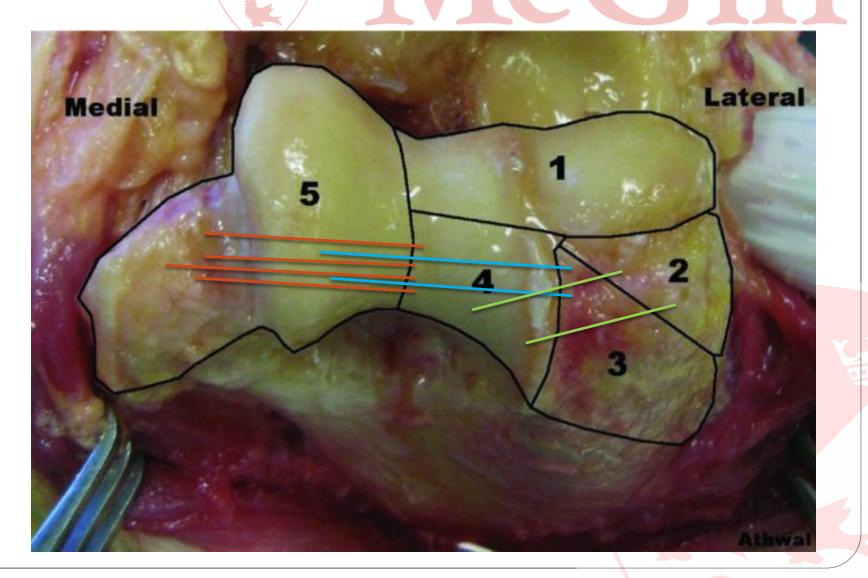


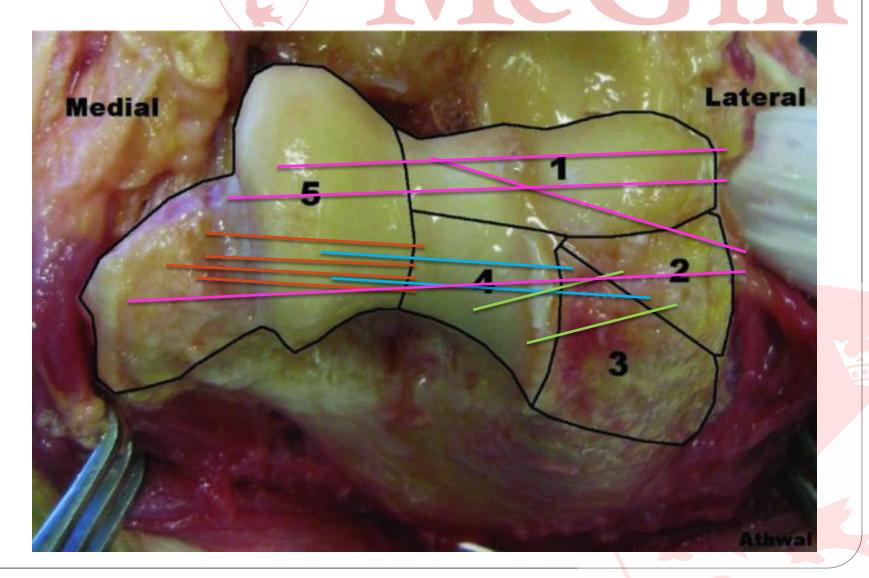
Strut screw Bone graft Multiple Kwires Sequential placeme

Pieces too small To lock from plates Used plate as a Template ??









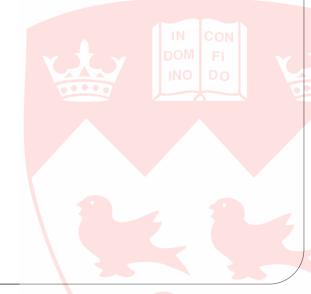
# 6 year Follow up now out 14 years





# DERMOPLASTY

- Option for revision in young patient where TEA not an option
- Done a few surprisingly, happy patients
- Use abdominal dermis allows primary closure



### Examples

All pieces easily reducible

38 y.o. Female

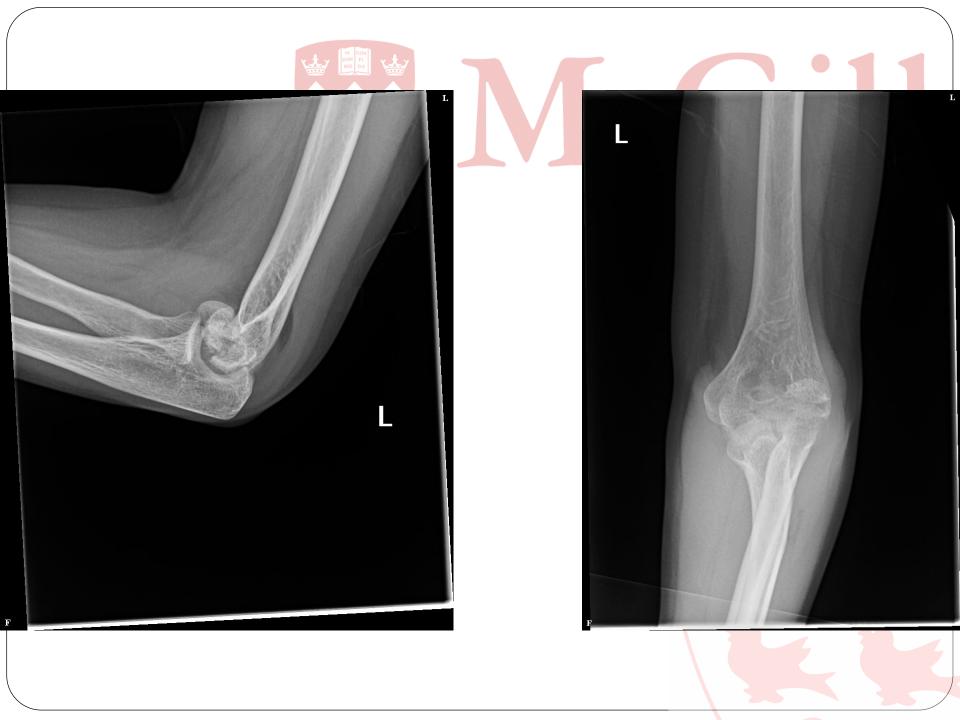
Some bone missing

Some cartilage missing

What cartilage

- Fell on stairs
- Otherwise well
- No soft tissue issues
- NV intact



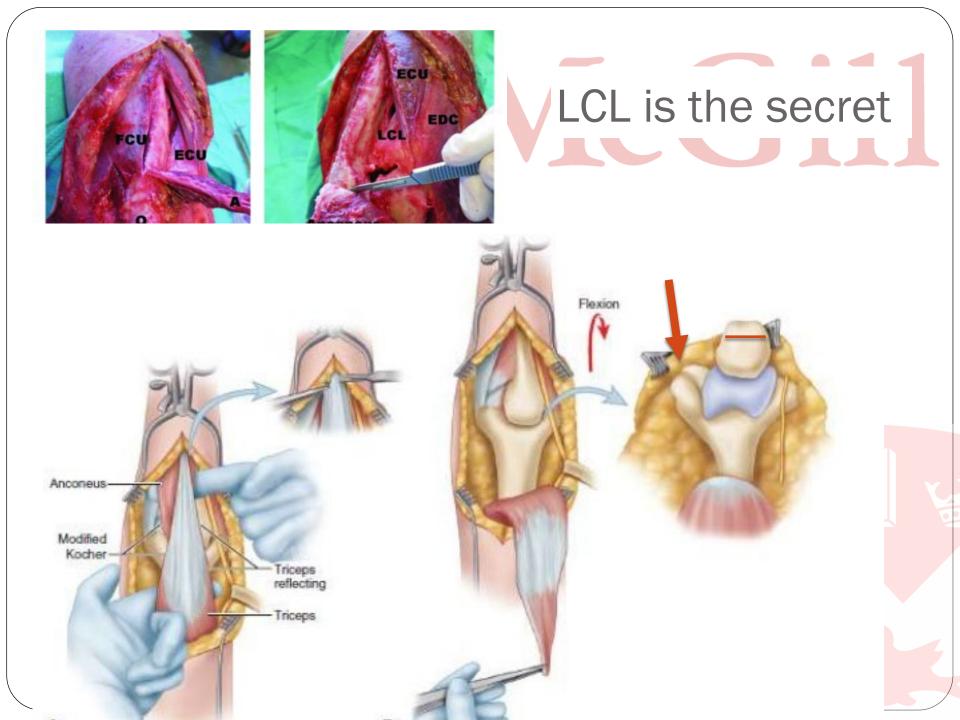


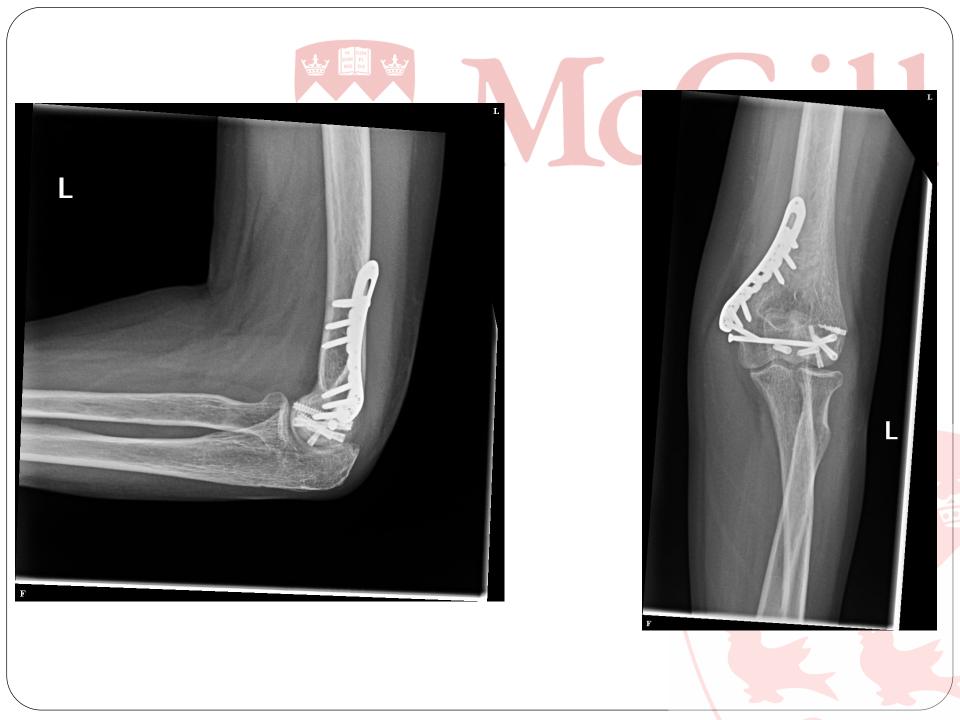






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# Approaches

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Some cartilage missing

What cartilage

Is that an elbow?

### **Medial Morrey**

TEA Allograft

**Triceps Splitting** 

### Allograft

# Allograft





# Examples

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What cartilage



# Examples

All pieces easily reducible

Some bone missing

Some cartilage missing

What cartilage

Is that an elbow?

Somebody tried 3 weeks old



- Is there any good elbow?
- One that lasts
- One that can used under 60?









# Thanks



