

Irreducible DRUJ Dislocation; Do Not Ignore The TFCC

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INTRODUCTION

Distal radioulnar joint (DRUJ) dislocations are relatively uncommon injuries that typically result from high-energy trauma or forceful impact. Most DRUJ dislocations can be reduced through standard closed reduction techniques. However, in certain cases, the dislocation may be irreducible, suggesting the involvement of additional anatomical factors that obstruct the reduction. One such factor is a tear or dysfunction of the triangular fibrocartilage complex (TFCC), which plays a crucial role in maintaining the stability of the DRUJ.

REPORT:

A series of cases showing demonstrating poorly managed DRUJ dislocations because TFCC entrapment was not reduced and a forceful immobilization with K-wires without clearing the DRUJ of the anatomical block by the torn TFCC Herniating into the joint will be highlighted. A case of the appropriate handling of the case will be highlighted.

A 27 year old Gentleman presented with pain and limited ability to supinate and pronate his left forearm for 7 months. He had a history of injury at the wrist DRUJ where reduction and K-wiring was done. Following removal of the K-wire the patient claimed he was unable to move without pain and had limitation of movement. The condition had not improved with therapy.

Clinical examination and radiological examination showed DRUJ dislocation which was not reducible and painful

Surgical exploration revealed the TFCC trapped in the DRUJ and was released and subsequently repaired



Figure 1: Xray (lateral view showing dislocated ulna at DRUJ)



Figure 2: MRI TFCC in between DRUJ

CONCLUSION:

TFCC tears significantly contribute to the irreducibility of DRUJ dislocations, acting as a mechanical block to joint reduction. In many cases, closed reduction failed, necessitating surgical intervention, including TFCC repair or reconstruction, to achieve proper reduction and restore joint stability.

Literature about this condition is however sparse

REFERENCES:

1. Iwamae M, Yano K, Kaneshiro Y, Sakanaka H. Arthroscopic reduction of an irreducible distal radioulnar joint in Galeazzi fracture-dislocation due to a fragment of the ulnar styloid: a case report. BMC Musculoskeletal Disorders. 2019 Jul;20(1):354. DOI: 10.1186/s12891-019-2735-5.