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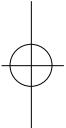
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= Abstract =

Fracture-Separation of the Distal Humeral Epiphysis in Young Children

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We have reviewed seven cases of fracture-separation of the distal humeral epiphysis, two of which were initially misdiagnosed as a fracture of the lateral condyle and one as a fracture of the supracondyle. The four cases were treated by closed reduction and cast immobilization, and three cases by open reduction and internal fixation. The one case with conservative treatment had cubitus varus, other were good result. To distinguish the fracture-separation from a fracture of lat. condyle and from a dislocated elbow is impossible using clinical signs alone. For reducing misdiagnosis, it is important to consider age and there could be need further evaluation such as arthrogram, USG, CT and MRI.

Key Words : Distal Humeral Epiphysis, Fracture-Separation

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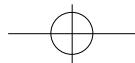


Table 1. Three groups based on roentgenographic appearance

Table 2. Analysis of cases

Case	Sex/Age	Cause of truma	Initial diagnosis	Final diagnosis	Tx	ROM [§]	Carrying angle
1	F/22mo	slip down	at. condyle Fx.	S-H type II	CR †	5°-135°	20° varus
2	F/16mo	fall down	S-H* type I	S-H type I	OR/IF‡	full	5° varus
3	M/22mo	fall down	S-H type II	S-H type II	OR/IF	full	3° varus
4	M/4yr	fall down	lat. condyle Fx.	S-H type II	CR	full	5° varus
5	M/4yr	slip down	S-H type I	S-H type I	CR	full	5° varus
6	M/13mo	fall down	S-H type I	S-H type I	CR	full	5° varus
7	M/33mo	slip down	supracondylar Fx.	S-H type II	OR/IF	full	3° varus

* Salter-Harris

[†]Closed reduction

[‡]Open reduction and internal fixation

§ Range of motion

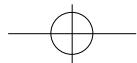


Fig 1. Arthrogram of fracture-separation of the lower humeral epiphysis.

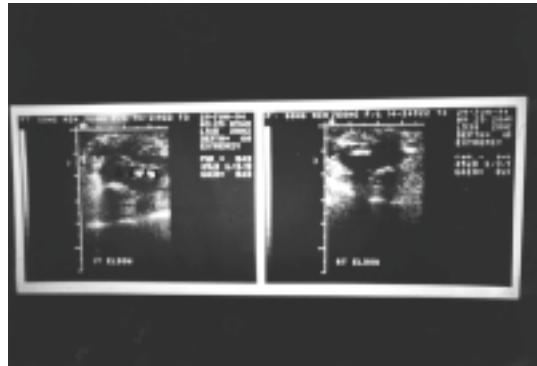


Fig 2. USG of fracture-separation of the lower humeral epiphysis. USG shows high echoic line (arrows) on epiphyseal area.

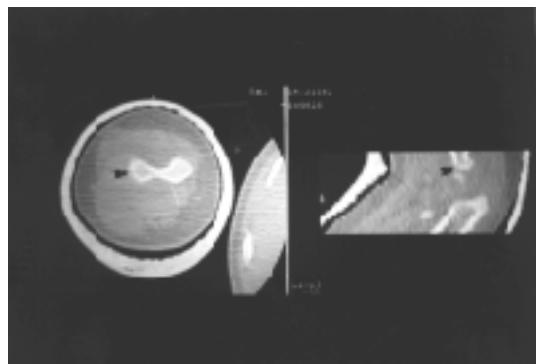


Fig 3. CT shows slightly displaced fracture-separation of the lower humeral epiphysis.



Fig 4. MRI of fracture-separation of the lower humeral epiphysis. T1 weighted coronal image shows epiphyseal plate and displaced epiphysis

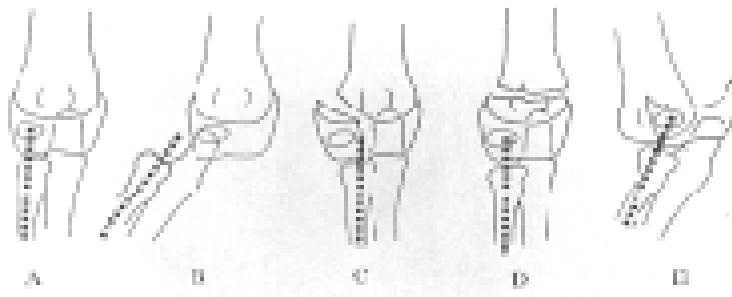
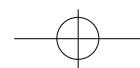


Fig 5. Diagrams of the elbow

- A.** normal elbow
- B.** dislocation of the elbow
- C.** fracture of the lateral condyle
- D.** supracondylar fracture
- E.** fracture separation of the lower humeral epiphysis.



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135° ,
20°
(Fig. 6-A,B,C).

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15
(Fig. 7-A,B,C).
(Table 2).

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Salter-Harris type I, II
2
. 1967 Macafee¹³⁾ 3
Salter-Harris type II



Fig 6. A 22-month-old girl with epiphyseal fracture-separation of distal humerus.

- A. Initial roentgenogram of the Rt. elbow.
- B. MRI after 3 month showing epiphyseal injury.
- C. Anteroposterior roentgenogram after 30 months showing cubitus varus deformity

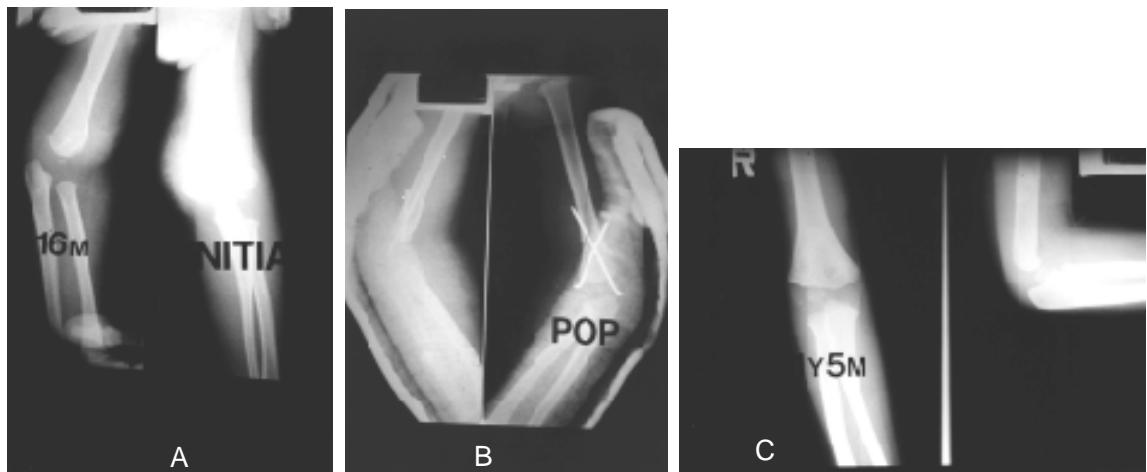
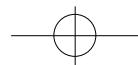
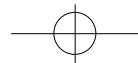


Fig 7. A 16-month-old girl with epiphyseal fracture-separation of distal humerus.

- A.** Initial roentgenogram of the Rt. elbow.
B. Roentgenogram after open reduction and internal fixation.
C. Roentgenogram after 15 months showing good result.

Bright	5)		가	Salter-Harris type I
	(Rotatory shear force)		13,16),	Salter-Harris type II
		Salter-Harris	가	
type I	,		4,11,12,15)	
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Salter-Harris type II			가	,
				.
	28.8	, Salter-		.
Harris type I, II 가	3 , 4	(Table 2).		.



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8)

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(Fig. 2).

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6,7,8,11,12,15,16). DeLee, Holda
8,11,12,15)Wrobel¹⁷⁾

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Sutherland

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(Table 2).

Mizuno¹⁵⁾ 3

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(Table 2).

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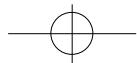
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