

Perilunate Dislocation

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Category: Undergraduate

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ABSTRACT

HISTORY

Twenty-three year old college defensive back sustained a wrist injury during a Saturday night football game. During the 4th quarter, he landed on his right hand causing hyperextension of his wrist. While in hyperextension, the athlete's fingertips and wrist "gave away" along with a popping sensation. After a sideline evaluation done by the head athletic trainer, the athlete did not return to the game.

PHYSICAL EXAM

Clinical examination the following day displayed obvious swelling on the right wrist along with pain. Both the athlete's range of motion and strength had decreased, and he was unable to make a power grip due to the swelling and pain. The athlete also had decreased sensation of the index, middle, and ring finger to light touch. While palpating the athlete's hand around the lunate, the athlete complained of tenderness along with increased pain during pronation and supination.

DIFFERENTIAL DIAGNOSIS

1. Wrist Sprain
2. Dislocated perilunate
3. Acute median nerve injury

TESTS AND RESULTS

-Radiograph: Displayed dorsal perilunate dislocation with no obvious fracture as well as median nerve damage

FINAL/WORKING DIAGNOSIS

Perilunate dislocation of right hand along with acute median nerve injury

TREATMENT/OUTCOME

1. Stabilize wrist with taping/bracing and ice to decrease swelling
2. Open reduction and internal fixation of perilunate dislocation and release of carpal tunnel for acute median nerve injury.
3. Placed in short arm cast for 8-10 weeks.
4. Work on range of motion of the digits while in cast
5. Work on range of motion of wrist as well as hand exercises to increase strength after cast is off

- 6. Released to play in May of 2013
- 7. Returned to sport in August of 2013

