Non-union of the Trapezium: Rare consequence of a rare injury
Deepak Samson, Matthew Jones, Andrew Mahon
University Hospital Coventry and Warwickshire

Introduction
- Trapezium fractures are rare
- They account for about 3-5% of all carpal fractures
- Isolated trapezium fractures are notoriously difficult to diagnose on plain radiographs
- They are likely to be missed in the emergency department setting with symptoms being misattributed to a soft tissue injury
- We report a case of a missed, isolated, coronal fracture of the trapezium which presented to us as a non-union
- This case highlights the importance of a high index of suspicion in the face of continuing symptoms and the judicious use of cross sectional imaging

History
- A 49 year old man fell from his mountain bike at speed and presented to his local secondary care hospital with an injury to the base of his left thumb.
- There was pain and swelling at the base of the thumb with painful restriction of movements.
- Initial radiographs were deemed to be normal and he was treated as a soft tissue injury with a period of immobilisation followed by physiotherapy.

Management
- CT scan was obtained to further characterise the anatomy of the fracture.
- We performed an open reduction and internal fixation through a Wagner approach with headless compression screws
- At three months from injury, the range of movement had improved and he was back to biking. Plain radiographs confirmed union across the fracture site.

Conclusion
Open reduction and internal fixation, even after delayed diagnosis and late surgery, can result in good functional outcome.