ELBOW ANKYLOSIS: TREATMENT BY FASCIA LATA INTERPOSITION ARTHROPLASTY

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INTRODUCTION
Elbow ankylosis is a predictable complication in severe complex traumas of distal humerus and of the proximal radius and ulna in which, in addition to rigidity, there is an important joint impairment but no prosthetic replacement is indicated. In young and motivated patients, the retrieval of range of motion can be restored by fascia lata interposition arthroplasty. (1) The purpose of the work is to bring our experience of a case study of five patients who had surgery between 2009 and 2016 with this method.

METHODS
Five patients had surgery: we performed arthrolysis using a medial access performing epitroclea osteotomy and fascia lata interposition in four cases (age 35, 40, 50 and 60 years - 2 women and 2 men) in one case, 50 years old, a posterior access was performed. In three cases at the end of surgery and legaments reconstruction, the use of the external fixator was necessary, while in two cases the elbow had good residual stability and were not protected. The minimum follow-up was 8 months, the maximum 8 years. Twice the affected side was the dominant one. As for etiology, there were four post-traumatic cases and one post coma. The ankylosis was present at 90 ° in three patients and at 80 in one and 100° in the other case. Patients were evaluated with MEPS. Once the fascia lata was an autograft from the triceps of the patient. The other four times from bank tissue and folded on herself. Fig 2

RESULTS
There were no major complications. In all patients, a degree of satisfactory, pain-free range of motion was achieved; patients could lead the hand to the mouth in four cases and 5 cm from the face in the last case. There have been no cases of secondary instability. Three cases have been classified as good (80 MEPS score) and two as discreet (70 MEPS score); the ROM were between 50 and 100 degrees. Tab 1

CONCLUSION
Arthroplasty of the elbow with fascia lata or triceps band interposition is a viable alternative in those patients with severe functional limitations that have no indication for an elbow prosthesis. The loss of movement of this joint is poorly tolerated and constitutes an important functional impairment for a young patients.