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Olecranon fracture

When you bend your elbow, you can easily feel its "tip," a bony prominence that extends from one of the lower arm bones (the ulna). That tip is called the olecranon.

It is positioned directly under the skin of the elbow, without much protection from muscles or other soft tissues. So it can easily break if you experience a direct blow to the elbow or fall on a bent elbow.

Usual treatment is surgical fixation

How do I know I have olecranon fracture?

History of injury

Sudden, intense pain.

Bruising around the elbow.

Rupture or abrasion of the overlying skin.

Possible deformity, if there is also a dislocation of the bone.

Tenderness and swelling over the bone site.

Numbness in one or more fingers.

Pain with movement of the joint.

How does my doctor recognise?

History of trauma

Clinical sign above

X-rays to confirm the diagnosis and classify the type of fracture.

Fractures are generally divided into three types

Type I fractures are generally stable with little displacement. These fractures can generally be treated nonsurgically.

Type II fractures are the most common. They are relatively stable, although there is displacement of the bone pieces.

Type III fractures are displaced and joint instability.

Treatment depends on the type of fracture

A type I fracture can usually be treated with a splint or sling to hold the elbow at a 90 degree angle. The physician will request a second set of X-rays after 10 days to make sure that the broken pieces have not become displaced. Gentle motion is permitted, and hand and wrist exercises should be done daily.

A type II fracture is best treated surgically.

The orthopaedic surgeon will use a plate or a combination of wires and pins or screws to hold the bones in place.

Physical therapy to maintain range of motion will start a day or two after the operation, and continue for 6 weeks

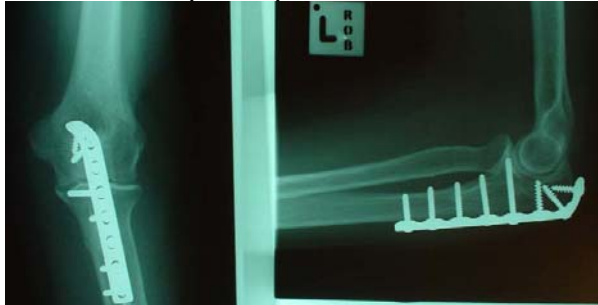
Type III fractures are also treated surgically, usually with a plate that fits under the ulna and around the tip of the elbow.



Figure 4. Normal anatomy of the elbow joint.



Screws hold the plate in place.



What can I expect right after surgery?

1. After surgery, your elbow will probably be covered by a bulky bandage
2. You may also have a small plastic tube that drains blood from the joint. Draining prevents excessive swelling from the blood.
3. The elbow is held in a slab for two weeks
4. Stitches will be removed after 10 to 14 days
5. If fixation is good elbow can be moved after 2 weeks
6. Healing is seen in 6weeks
7. Can go back to work in 3 months

How soon will I be able to use my elbow again?

A physical or occupational therapist will direct your rehabilitation program. Recovery takes up to three months.

Then you'll begin gentle range-of-motion exercises.

Strengthening exercises are used to give added stability around the elbow joint.

You'll learn ways to lift and carry items in order to do your tasks safely and with the least amount of stress on your elbow joint.