

To Demonstrate the Functional Outcome of Shoulder in an Unusual case of Floating Shoulder in an Elderly Patient managed conservatively- A Case Study

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Abstract

In this case study, of a 71-year-old male patient with a history of road-traffic accident; sustained fracture of left acromion, coracoid process and glenoid with intact head and neck of humerus. The patient was treated conservatively (with a shoulder immobilizer for 4 weeks, followed by physiotherapy) and the functional outcome of shoulder was assessed with the help of Constant-Murley Shoulder Outcome Score at 6, 8, and 12 weeks.

Keywords: Floating Shoulder, conservative management

Introduction

The floating shoulder is an uncommon but important injury pattern. Although it is frequently defined as an ipsilateral fracture of the clavicle and scapular neck, recent studies suggest that ligament disruption associated with a scapular neck fracture contributes to the functional equivalent of this injury pattern, with or without an associated clavicle fracture. Determining the specific injury patterns indicates the potential for significant instability, and correlating these patterns with clinical outcome is a challenge. Because the degree of ligament disruption is difficult to assess on radiographs, indications for nonsurgical and surgical management are not well defined. Minimally displaced fractures typically do well with nonsurgical care, as shown in this study. However, fixation of both fractures is recommended in certain fracture patterns.

Case report

Study included a 71 year old, retired (Right hand dominant) male patient with a history of trauma to left shoulder 1 week back. Patient had complaints of pain over dorsal aspect of left shoulder with difficulty to moving his left upper limb. The patient was advised X-ray Left shoulder AP – view (Fig. 1) and subsequently, a CT- Scan with 3D – Reconstruction (Fig. 1) which were suggestive of Minimally displaced fracture of acromion process of left scapula with un-displaced fracture of left glenoid process. The patient was managed conservatively with a Shoulder Immobilizer and was followed up at 6,8,12 weeks from the day of treatment. During the follow ups, the functional outcome of the shoulder was assessed with the help of The Constant - Murley Score. The patient was followed up in this study at a time interval of 6, 8 and 12 weeks from the day

of treatment (Shoulder Immobilizer). At the follow up visit of 6 weeks, the patient was subjected to a follow up X-ray (Fig. 2a) that showed signs of union with good alignment. The following visit was done at 8 weeks and functional outcome was scored at 65/100 points (Fig. 2). The last follow up for the patient was done at 12 weeks and functional outcome was scored at 75/100 points (Fig. 2). (The Constant – Murley Score was used to calculate the functional outcome).

Discussion

The decision for conservative management for this case was taken on the basis of age of the patient, non-dominant side and fewer functional demands, along with intact clavicle and minimally displaced glenoid neck fracture and late presentation of the patient to us. Reference values for the relative Constant scores for; 71–80 years old male is- 75 ± 3.6 with strength of 11. The patient achieved a score of 75 with a strength of 9.

Conclusions

We present an uncommon injury of the shoulder i.e. Floating Shoulder in an elderly patient which was treated conservatively and the functional outcome measured with The Constant–Murley Score on follow up and with excellent results.

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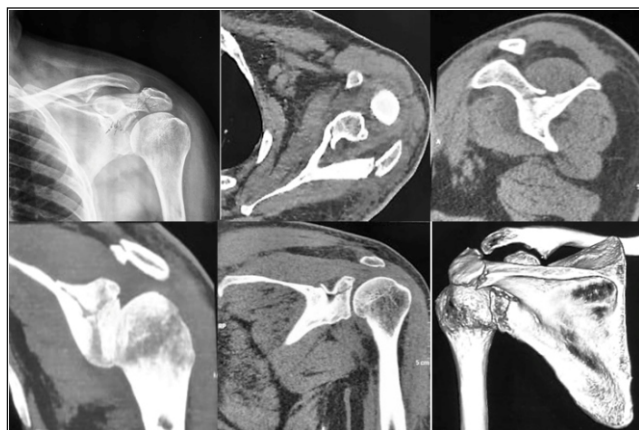


Figure 1: X ray and CT Scan suggestive of minimally displaced acromion fracture

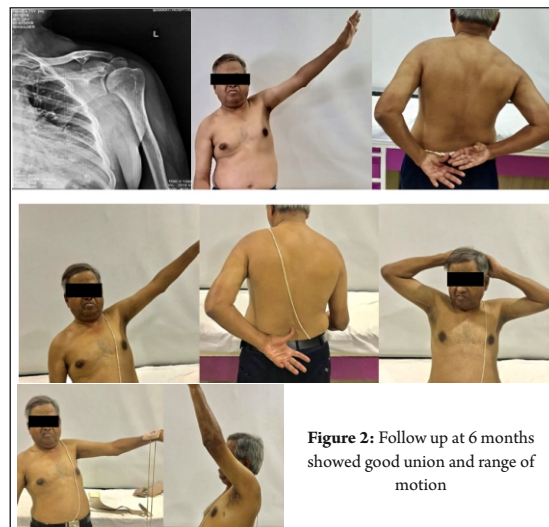


Figure 2: Follow up at 6 months showed good union and range of motion

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