SIDE-SWIPE FRACTURE-DISLOCATION OF THE ELBOW.

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Side-swipe fracture-dislocation of the elbow is sustained by a driver of a motor-car who, while resting an arm with the elbow projecting through the window met an on-coming car too closely, as illustrated in the picture. This is the one and only mechanism which can cause this particular type of injury.

As can be seen from the accompanying x-ray pictures, the injury is a combination of fractures and a dislocation. There are one fracture of the shaft of the humerus, one of the shaft of the ulna, one of the shaft of the radius, and one of the olecranon which is comminuted and an anterior dislocation of the elbow joint.

The patient whose x-ray picture is shown here is a man of 37, Unit history number = 058746/2501 and an Admission number = 15208/2501.

He was sitting in a motor-car with his right arm resting on the car’s window, and his elbow projecting out, heading from Don Muang to Bangkok, when an on-coming motor-car heading from Bangkok to Don Muang passed his car at high speed and so close that it swiped the patient’s projecting elbow, causing the injury as shown in the x-ray.

He came to me for treatment 3 months after the accident. All of the fractures have united but the anteriorly dislocated elbow remained unreduced and was ankylosed in the position of complete extension.

As for the treatment, arthrectomy was performed on October, 9, 1958, with fair result.

This combined injury of the bones and joint is called a baby car fracture by Sir Reginal Watson-Jone. Because in Britain it usually occurs in users of small 8-horse-powered or baby cars, who find not enough room inside the cars for their arms and elbows.

It also occurs very frequently in America and elsewhere in the world where motor-cars are big and quite roomy but the occupants rest their arms on the car’s window with their elbows jutting out. In America this type of injury is called a side-swipe fracture dislocation, because it describes the mechanism of causation more accurately.

The treatment of recent cases consists of immobilization of the injured arm with the elbow fully extended, preferably in a Thomas arm splint with skin traction.
By this means the anterior dislocation of the elbow can be reduced and so all the fractures that occurred. But operative reduction and reconstruction of the elbow joint, such as arthroplasty or arthrectomy, however, may be required later.

This type of injury is serious and presents quite a problem in treatment, but it can be easily prevented by remembering this slogan, while riding a motor-car, big or small. "Don't put your elbow out so far, it may go home in another car."

The picture shows 2 motor cars side-swiping each other.
A. Before arthrectomy.

B. After arthrectomy.