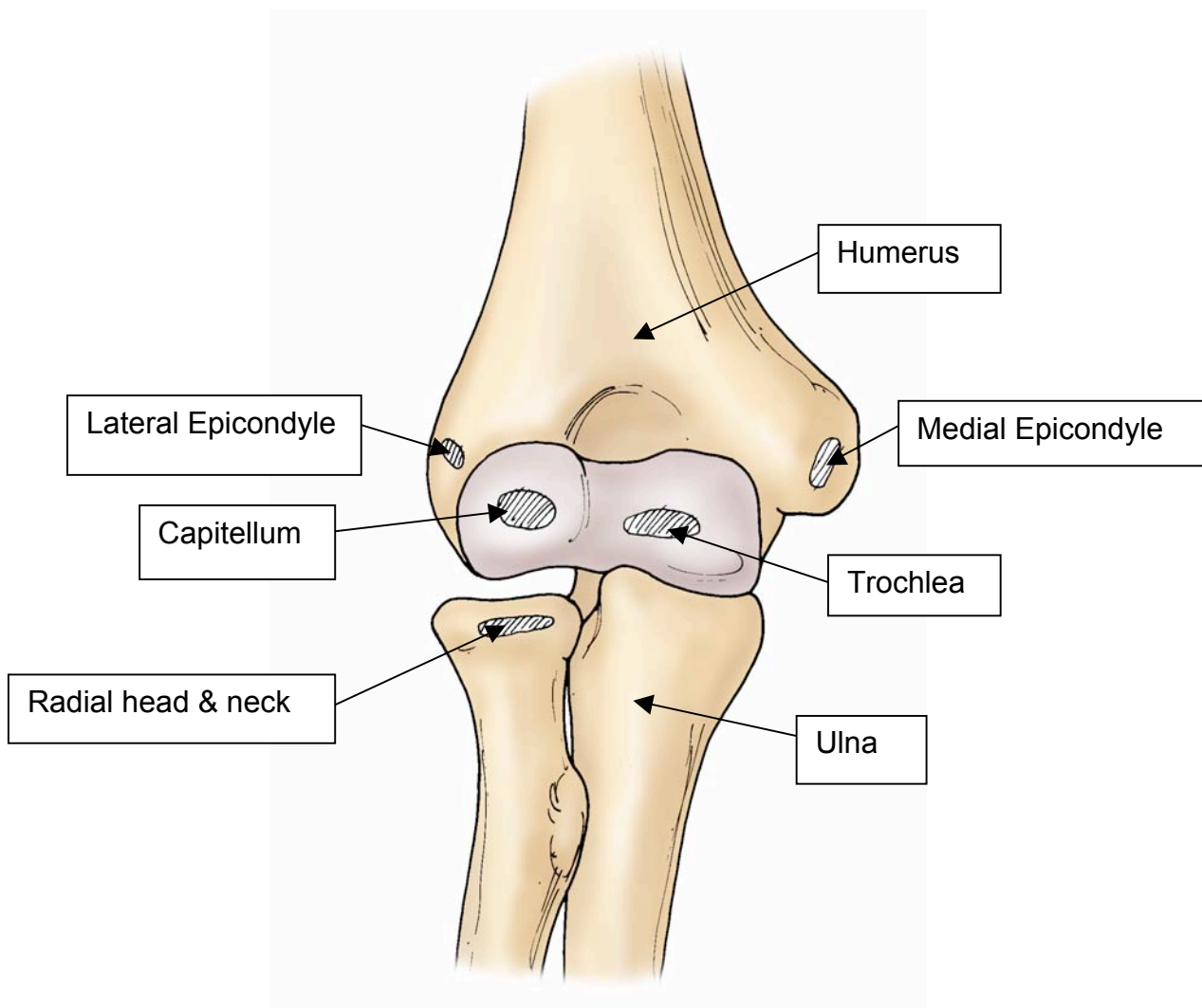


# Elbow Fracture



The elbow joint is very complex. Seven different growth centers must work together in order for the elbow to grow properly. An overuse injury or fracture to the elbow joint may therefore lead to a growth disturbance and decrease in range of motion. The humerus contributes 4 of the growth centers, the radial head contributes one and the olecranon two.

The diagnosis of the growth injury may be made based on the degree of swelling, limited range of motion, the presence of pain and tenderness, and x-rays. Most fractures result in the bone bending or

angling slightly. Treatment in a long arm cast for three to six weeks may be prescribed and careful follow-up may be required.

In other fractures, the growth center has separated from the main part of the bone. This almost always means that overlying muscles, blood vessels, and nerves have been stretched or even torn. While the pediatric orthopedist may be able to realign the bone with a cast or surgery, residual stiffness or altered growth of the elbows may still occur. Immobilization in a long arm cast until there is "good evidence of bone healing" is prescribed in almost all cases. Custom tailored rehabilitation after cast removal may be needed in certain circumstances.

Fortunately, the vast majority of children and teenagers heal their elbow injuries with few long-term problems.



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