

Neglected Musculoskeletal Trauma

Khalil Ahmad Gill¹, Faaiz Ali Shah²

¹Professor/Head of Orthopaedic
Department Nishtar Medical
University Multan

²Assistant Professor Orthopaedics
Lady Reading Hospital Peshawar

Corresponding author:

Faaiz Ali Shah
E-mail: faaizalishah@yahoo.com

Musculoskeletal injuries constitute a large proportion of global burden of trauma. Lack of proper treatment of musculoskeletal trauma results in disability and morbidity.¹ In developing countries patients with musculoskeletal trauma usually do not present to hospital on time due to lack of transportation, poverty and ignorance. Furthermore many government hospitals do not have adequate infrastructure and trained staff resulting in delayed diagnosis or suboptimal treatment of these injuries.² Due to high influx of patients and constrained resources in state-owned hospitals of our country patients had to wait for their turn for surgery which cause frustration and anger amongst these patients and most of them leave hospital without definitive treatment and unfortunately do not get effective alternative treatment outside. Poverty and superstitious believes are a contributing factor for consulting bonesetters and improper treatment.³ Neglected musculoskeletal injuries are thus untreated injuries due to one or other reasons. In developed countries neglected musculoskeletal injuries are less frequent except missed injuries of the hip and spine reported in some polytrauma patients. Whereas in India 29% patients with fractures and dislocation in a teaching hospital had 50% neglected musculoskeletal injuries.⁴

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Although no consensus can be found in the literature regarding a universal or exact definition or duration of an un treated injury to be termed as neglected. The duration is variable for different regions of the body. Hassan⁵ was of the opinion that in case of cervical spine injury if the time period between the injury and correct diagnosis is more than three weeks the cervical spine injury is neglected. Senguptua⁶ called neglected injury to any spinal cord injury which is not treated on time but lately and with limited treatment options. Paediatric lateral condyle fractures are labelled neglected when presented after three weeks either due to misdiagnosis (17% of cases) or late presentation.⁷⁻⁹ Acetabular fractures are considered neglected if not treated for more than three weeks.¹⁰ For Monteggia fracture dislocation the cut off period is 4 weeks.¹¹ A shoulder dislocation that has not been diagnosed for 3 to 4 weeks is termed neglected or chronic dislocation.^{12,13} A posteriorly dislocated hip is difficult to reduce closely under general anaesthesia after 2 to 4 weeks and is considered neglected.^{14,15}

In developed countries neglected injuries are usually considered as those injuries which are missed at initial presentation whereas in developing countries it includes both missed injuries as well as

injuries presented late and without any treatment or lack comprehensive treatment.¹⁶ Some studies referred neglected injuries to unintentional injuries reported in children in relation to child abuse.¹⁷

Neglected fracture neck of femur is an extremely difficult problem with poor functional outcome regardless of treatment option used. Head preserving options are preferred over replacement in adolescent and young patients in developing countries.¹ Other commonly neglected musculoskeletal injuries are paediatric supracondylar fractures, elbow dislocation, Monteggia fracture dislocation, DDH, tendon and nerve injuries and stiff elbow resulting from excessive rubbing and manipulation of bonesetter.³ A neglected clubfoot is usually presented at adolescent age and resistant to conventional techniques and treated with Ilizarove.¹⁸ Neglected spinal injuries with or without neurological compromise constitute 4 to 30%.¹⁶ Soft tissues around the neglected fractures and dislocations are contracted and the fractures lack healing potential. Angular and rotatory deformities are common due to malunited fractures and children suffers growth retardation.^{1,3}

Treatment of neglected musculoskeletal trauma is rarely reported in an organized and persistent

manner by most well reputed international indexed journals except for publication of few individual case reports and personal experience of some surgeons.¹ Moreover one can not find detailed chapters on neglected musculoskeletal trauma in standard Orthopaedic text books. It is unfortunate that Orthopaedic literature has mainly focused on treating fresh musculoskeletal trauma and neglected musculoskeletal trauma is in fact neglected. The indexed journals must publish articles on neglected musculoskeletal trauma as these journals are readily available to Orthopaedic surgeons of the developing countries.¹ A global debate of neglected musculoskeletal trauma through conferences and symposia would not only acknowledge that neglected trauma is not an issue of the developing countries but an issue of humanity and it will also help to evolve better treatment options.

The menace of neglected musculoskeletal trauma can only be highlighted if its true prevalence is reported in our society. Management of neglected musculoskeletal trauma is a challenge but an urgent need. Closed reduction is not possible due to soft tissue contractures. Accurate fracture reduction is difficult and surgical options are limited. It requires surgical expertise, innovative approach and specific protocols of management. Sharing of the clinical experiences of our senior professors backed by relevant evidence can be of great help in formulating practical guidelines and algorithm for treating neglected musculoskeletal trauma. The annual Orthopaedic Conference of Pakistan Orthopaedic Association(Orthocon) must have a dedicated academic session on neglected musculoskeletal trauma. Neglected musculoskeletal injuries will not exist if prompt access to effective medical care is ensured. The best approach to neglected musculoskeletal trauma is however prevention.

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