

Neglected post-traumatic shoulder dislocation with proximal humeral fracture

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Chronic shoulder dislocation with fracture of humeral head may often go undetected. The term “chronic” is usually employed to define the loss of injury recognition 4 weeks since occurrence. In the current report, the author describes a similar case of an undetected, long-standing neglected injury of the shoulder with a proximal humeral fracture in an elderly male [1]. Clinical examination elicited a positive Neer and Jobe tests. Shoulder X-ray (AP view) along with computed tomography with three-dimensional reconstruction can aid in evaluation in delayed or missed cases. Delayed or neglected shoulder dislocations are difficult to manage and may often progress to avascular necrosis and osteoarthritis. Ideal treatment strategy includes extensive shoulder reconstruction with fracture fixation and grafting or total shoulder arthroplasty for optimal functional outcome [2,3]. A reverse shoulder arthroplasty by transforming the glenoid into a spherical head with the humeral head as a socket can provide a stable fulcrum for the glenohumeral joints in the setting of deficient rotator cuff [4]. This case reiterates the importance of timely orthopedic consultation for subthreshold symptomatology to rule out bony discontinuity.

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Competing Interest

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