

# Comment on Yuan et al: The use of external fixation for the management of acute and chronic Monteggia fractures in children

# Ozan Ali Erdal Muharrem Inan

Sirs,

We have read the article written by Yuan et al<sup>1</sup> with great interest. We want to congratulate the authors for their study, which will be a valuable contribution to the scientific literature and patient care. Although Monteggia fractures are seen infrequently, we are aware of their importance primarily due to the high risk of missed diagnosis and their disabling results. This article is precious due to the quite high number of cases of such a rare paediatric orthopaedic condition. However, we noticed a distal radio-ulnar joint disruption in Figures 1, 3 and 5, which had not been mentioned as a complication or a limitation in the manuscript.

Proximal ulnar osteotomy, lengthening and grafting if needed, together with a transient transcapitellar radial fixation has been recommended in the literature regarding chronic Monteggia fractures.<sup>2-4</sup> Previous articles also suggest that external fixator use for fixation of the ulnar osteotomy has the advantage of more lengthening and less need for graft.<sup>2</sup> From this point of view, it is noticed from the radiographs in the paper<sup>1</sup> that ulnae were not lengthened. Moreover, the ulnae seem to be relatively shortened due to isolated angulation at the osteotomy site. This relative shortening of the ulna is probably the reason for those

Ortopediatri Istanbul, Academy of Pediatric Orthopaedics, Istanbul, Turkey

Correspondence should be sent to Ozan Ali Erdal, Ortopediatri Istanbul, Academy of Pediatric Orthopaedics, Istanbul, Turkey. E-mail: ozanaerdal@yahoo.com

distal radio-ulnar disruptions seen in postoperative radiographs of the cases.

In conclusion, we would recommend the authors to revise the cases, surgical technique description or the technique itself.

Yours faithfully, The Authors

Received 23 January 2020; accepted 21 February 2020.

### **COMPLIANCE WITH ETHICAL STANDARDS**

### **OA LICENCE TEXT**

This article is distributed under the terms of the Creative Commons Attribution-Non Commercial 4.0 International (CC BY-NC 4.0) licence (https://creativecommons.org/licenses/by-nc/4.0/) which permits non-commercial use, reproduction and distribution of the work without further permission provided the original work is attributed.

# ICMJE CONFLICT OF INTEREST STATEMENT

The authors declare no conflict of interest.

## **REFERENCES**

- 1. **Yuan Z, Xu HW, Liu YZ, et al.** The use of external fixation for the management of acute and chronic Monteggia fractures in children. *J Child Orthop* 2019;13:551–559.
- 2. **Soni JF, Valenza WR, Pavelec AC.** Chronic monteggia. *Curr Op Pediatr* 2019;31:54-60.
- 3. **Liao S, Pan J, Lin H, et al.** A new approach for surgical treatment of chronic Monteggia fracture in children. *Injury* 2019;50:1237–1241.
- 4. **Delpont M, Louahem D, Cottalorda J.** Monteggia injuries. *Orthop Traumatol Surg Res* 2018;104:S113–S120.

Cite this article: Erdal OA, Inan M. Comment on Yuan et al: The use of external fixation for the management of acute and chronic Monteggia fractures in children. *J Child Orthop* 2020;14:151. DOI: 10.1302/1863-2548.14.200005