

MICOD – 28/08/2024

Case contributor – Dr. Raj Chari

# MI-COD

MSS INDIA- Case Of the Day



# 25-year-old gentleman with alleged history of trauma to the ankle

14:15 hours

24/09/2022  
14:51:33.0637  
YSIOMAX-27267  
ACC No: RTH83002424



RED DOT



Im: 1  
59.8 kV  
2 mAs  
DAP: 0.125



19:05 hours



CT after initial reduction  
Position satisfactory but they  
were unhappy about plaster  
Decision to change plaster

# 25-year-old gentleman with alleged history of trauma to the ankle

19:49 hours

24/09/2022  
19:49:06.0123  
YSTOMAX-27267  
ACC No: RTT83002625

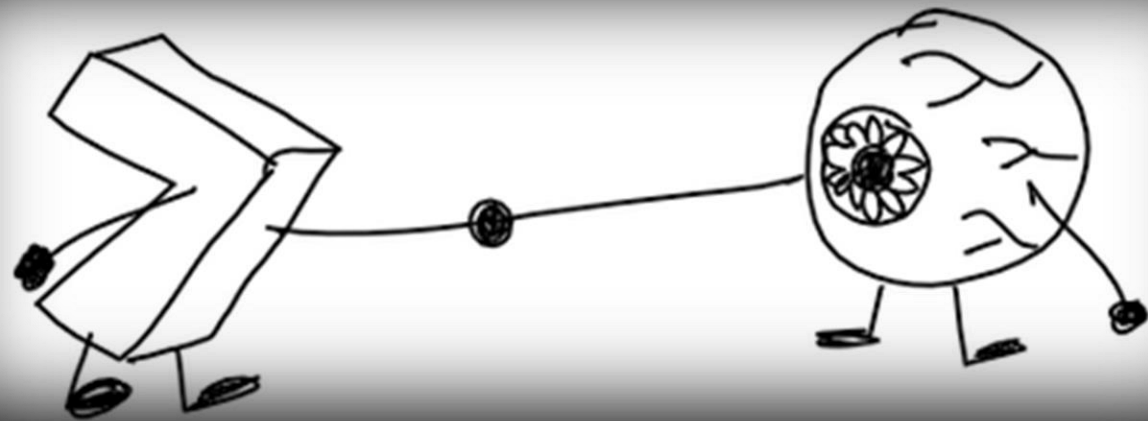
R  
ED



Im: 1  
59.8 kV  
2 mAs  
DAP: 0.257

- How can you explain the cause of that fracture seen in the second radiograph?
- What is the incidence of fractures secondary to reduction?
- What investigation should we perform next?

**Clue**



# Composition shadow from plaster, do nothing!



*Composition shadow from plaster*

- In a young individual, the force required to cause a spiral fracture must be very high and almost impossible during manual fracture reduction. If still a fracture happens, the reducer must either be a wrestler or a kabaddi player!
- Secondly, there is already an unstable malleolar fracture, it is impossible to get the torque required to cause an adjacent fracture





*Thank you*