

## CONGENITAL RADIOHUMERAL SYNOSTOSIS

LUIGI DE BONIS CAMIOTTI, GUILHERME MACHADO FULLY, MÁRCIO L. DUARTE

Universidade de Ribeirão Preto - Campus Guarujá, Guarujá-SP, Brazil

E-mail: marcioluisduarte@gmail.com

A ten-month-old boy with difficulty of moving his left upper limb since birth, especially when bathing and putting on clothes. Mother reports uneventful prenatal care and childbirth. On physical examination, he presents normal shoulder and wrist mobility but no flexion or rotation of the elbow (Fig. 1 A). Strength and sensitivity of the upper limbs were normal, as well as neuropsychomotor development. Radiography of the left upper limb detected fusion of the proximal portion of the radius with the distal portion of the humerus, compatible with congenital radiohumeral synostosis type II (Fig. 1 B and C). The patient was referred to the French technique osteot-

omy surgical procedure. Radiohumeral synostosis is considered a pathology with rare incidence worldwide, with around 150 cases described, having a high correlation with family history or correlation with other syndromes. It has two classifications: Type I – the elbow joint is in fixed extension – and Type II – the elbow joint is in fixed flexion. Computed tomography and magnetic resonance imaging can be used for diagnosis. The surgical procedure indicated is the French technique osteotomy, which uses two parallel screws and figure-of-eight wires. It may not be definitive in all cases, due to the significant rate of recurrence of synostosis.

Figura 1 |

