


CORRESPONDENCE

To the Editor:

Dear Sir,

ACROMIO-CLAVICULAR DISLOCATION

I thought you may be interested to learn of the “value” of an acromioclavicular dislocation. Recently I saw a 22 year old Rugby player in my clinic who had been troubled for some time with anterior knee pain. An incidental finding on general examination uncovered a dislocated right acromioclavicular joint. He told me that this injury had occurred three years previously and he had been told that no surgical treatment was necessary.

I do not intend to debate the need or possible techniques of surgical correction of acromioclavicular dislocation, but suffice it to say that this prop forward had not only a full range of pain-free movement of the affected shoulder, but used the injury to great advantage. He demonstrated the usefulness of this injury with me in the clinical area. He used the bony strut of the right shoulder to great effect to stab my cheek, and eye, and caused considerable discomfort by abrading my face. When he stood up from the scrum position his comment was “It’s great isn’t it, you can really aggravate the opposition with it. It is a shame I did not dislocate the other side as well”.

Could this case be regarded as “one in the eye” for those orthopods who advocate reduction and pinning of acromioclavicular dislocations?

Yours sincerely,

ANGUS HUGHES,
Locum Senior Orthopaedic Registrar