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## **A RARE CASE REPORT: POSTERIOR DISLOCATION OF SHOULDER**

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### **Abstract**

Posterior dislocation of the shoulder is a rare. A 18-year-old woman admitted to our department with complaint an injury to her left shoulder. Plain anteroposterior radiography of shoulder showed a posterior dislocation of the left shoulder. Shoulder was reduced. Shoulder was immobilized for 4 weeks

Posterior dislocations of the shoulder are uncommon. The keys to making the correct diagnosis involve maintaining a high index of suspicion.

**Keywords:** emergency, shoulder, posterior dislocation.

### **Резюме**

## **РЕДКИЙ СЛУЧАЙ: ЗАДНИЙ ВЫВИХ ПЛЕЧА**

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Задний вывих плеча встречается редко. 18-летняя женщина поступила в наше отделение с жалобой на травму левого плеча. Обычная передне-задняя рентгенография плеча показала задний вывих левого плеча. Плечо было редуцировано. Проведена иммобилизация плеча в течение 4 недель.

Поскольку задний вывих плеча является необычным типом вывиха плеча, ключевым вопросом к постановке правильного диагноза является высокий уровень предположений о его существовании, комплексное физикальное и радиографическое обследование с включением подмышечно-латеральной области.

**Ключевые слова:** неотложная помощь, плечо, задний вывих.

### **Түйіндеме**

## **СИРЕК КЕЗДЕСЕТІН ЖАҒДАЙ: ИЫҚТЫҢ АРТҚЫ ШЫҒЫП КЕТУІ**

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Иықтың артқы шығып кетуі сирек кездеседі. 18-жастағы әйел адам біздің бөлімшеге сол жақ иығының зақымдануына шағымданумен түсті. Өдеттегі иықтың алдыңғы-артқы рентгенографиясы Иықтың артқы шығып кетуін көрсетті. Иық редуцирленді. Иыққа 4 апта бойы иммобилизация өткізілді.

Өйткені иықтың артқы шығып кетуі иықтың шығып кетуінің ерекше түрі болып табылады, дұрыс диагноз қоюға негізгі сұрақ оның бар болуы туралы болжамдардың жоғары деңгейі болып табылады, қолтық асты – латералды аумақты енгізумен кешенді физикалық және радиографикалық тексеру.

**Негізгі сөздер:** шұғыл көмек, иық, тың артқы шығып кетуі.

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**Introduction**

Posterior dislocation of the shoulder is a rare but clinically and radiologically well-defined entity. It accounts for less than 2% of all dislocations of the shoulder, and can be missed in up to 80% of cases but is of diagnostic and therapeutic interest because most are missed on the initial examination [1, 3].

In this report, we aimed to present a rare posterior dislocation of the shoulder.

**Case Report**

A 18-year-old woman, with a dominant right hand, a student, suffered an injury to her left shoulder. After the injury occurred, the patient was seen in a local emergency room with complaints of left shoulder pain. She had pain in her shoulder. Functions (sensory and motor) of axillary nerve and all peripheral nerves were tested and were normal. Findings from vascular examination were also normal. Plain anteroposterior radiographs of shoulder showed a posterior dislocation of the left shoulder (Figure 1,2).



Figure 1. X-ray image of dislocation.

The patient was submitted to gentle closed reduction under sedoanalgesia of shoulder in emergency room. An attempt at closed reduction was successful. After the reduction control radiograph was taken and checked reduction. Shoulder was immobilized for 4 weeks.

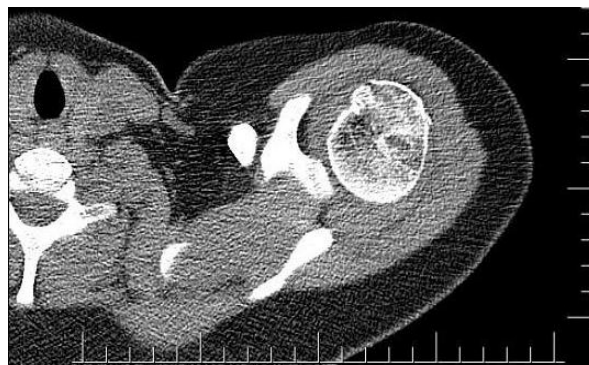


Figure 2. CT image of posterior dislocation.

**Conclusion**

Posterior dislocations of the shoulder are uncommon, representing less than 5% of all shoulder dislocations; they are often missed on initial presentation and they occur in patients who are younger than the majority of other patients who sustain a proximal humeral fracture [2, 4]. The keys to making the correct diagnosis involve maintaining a high index of suspicion, performing a thorough physical examination, and obtaining a complete radiographic series, including an axillary lateral view.

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