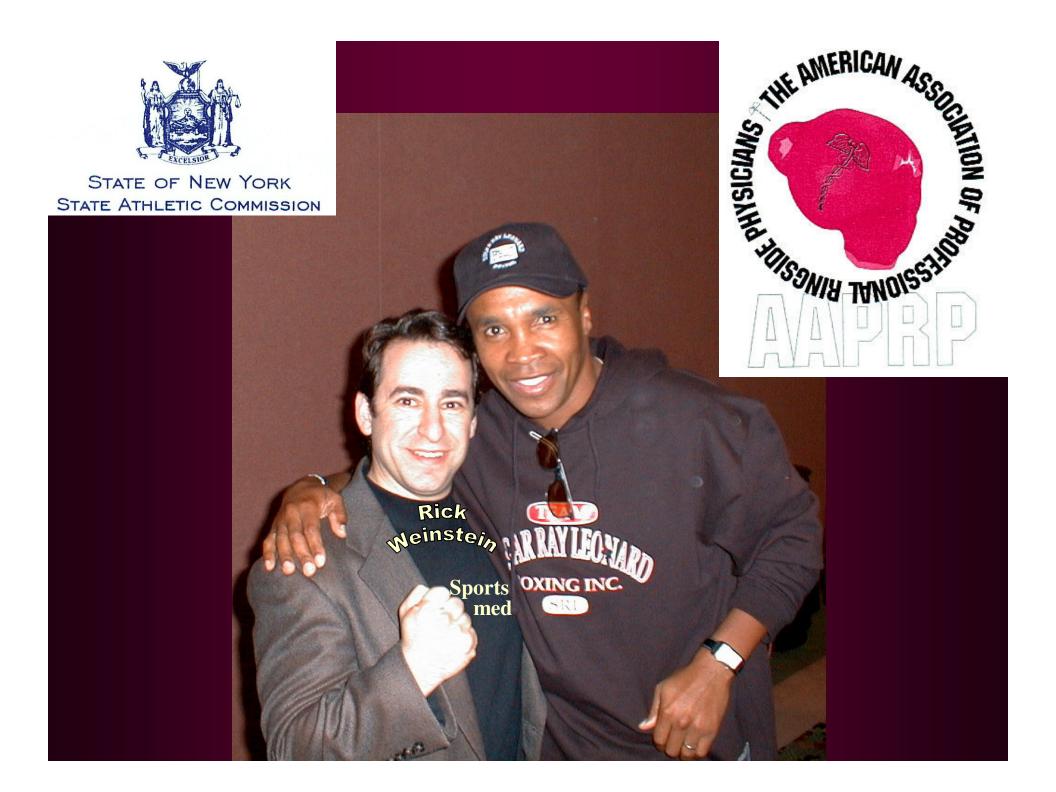
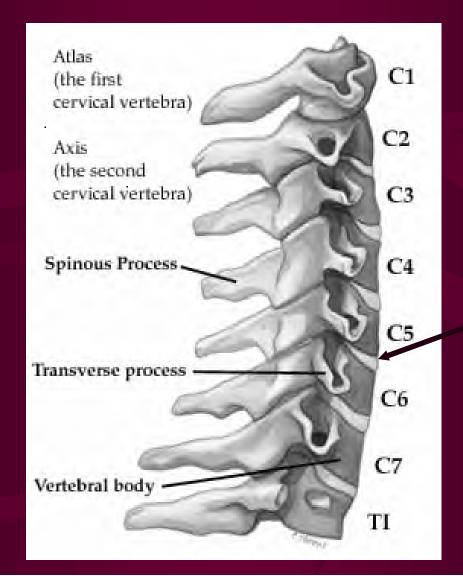
Orthopaedics in Boxing/MMA

Rick Weinstein, MD

Associate Professor NY Medical College
New York State Athletic Commission
Director of Sports Medicine
Bone & Joint Associates
White Plains, NY



Cervical Spine



disc

Cervical Spine

- Any boxer with head trauma, doctor *must* first protect the spine.
 - Do not move boxer and never move boxer's head
 - Do not let trainer/corner/referee move injured boxer
 - You must protect the boxer
 - ABCs

MRI C-Spine (normal)

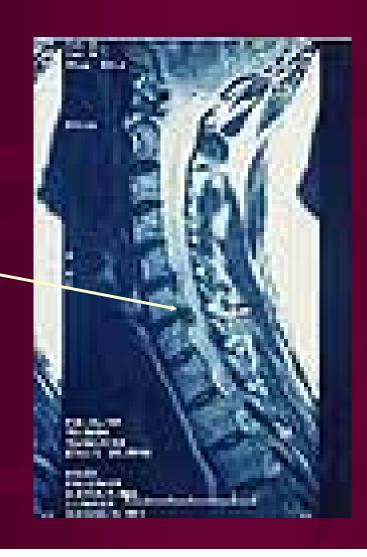
Vertebral body

Disc space



Spinal cord

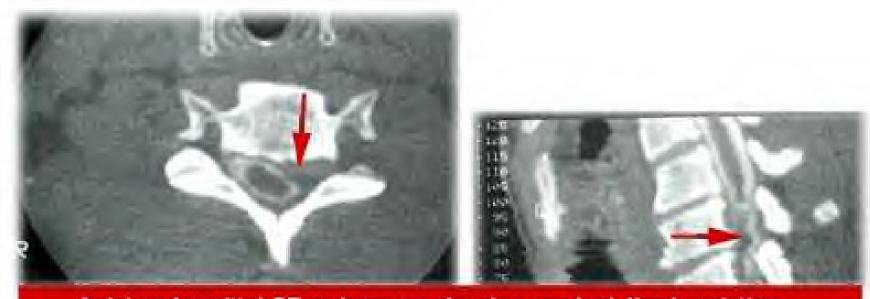
Herniated Disc



Cervical Herniated Disc

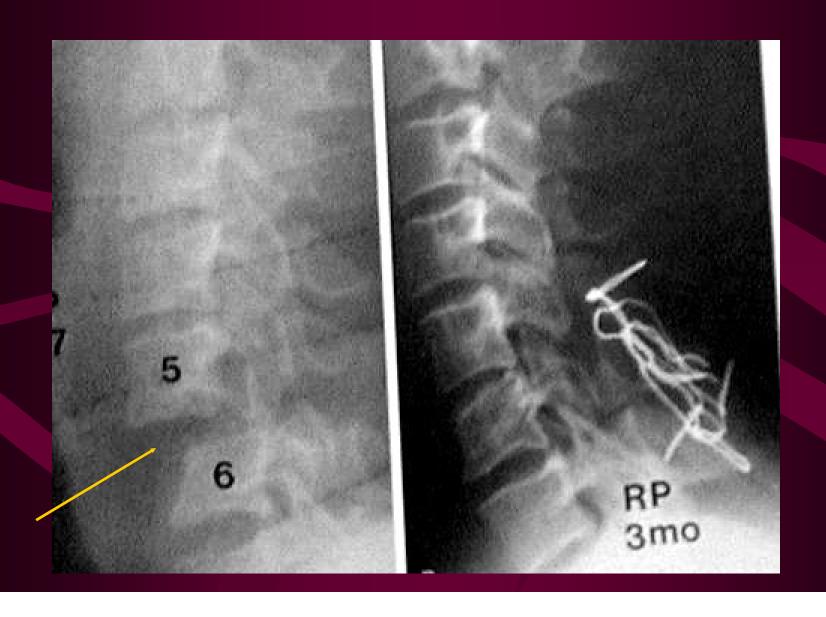


Cervical Herniated Disc

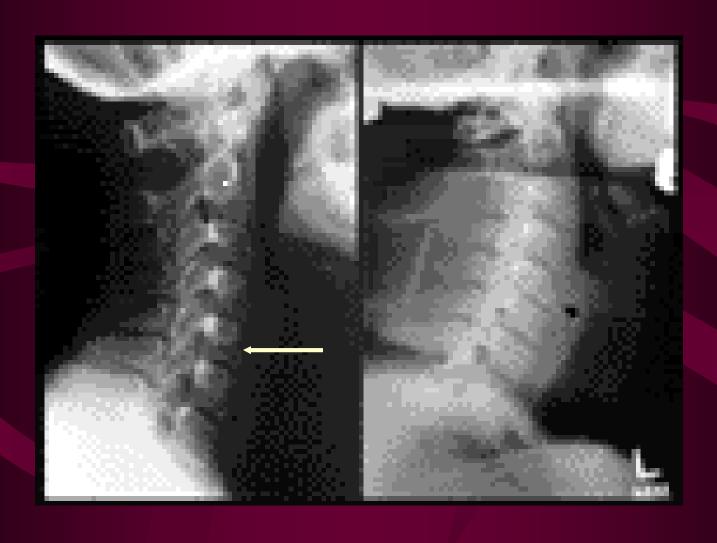


Axial and sagittal CT myleogram showing cervical disc herniation

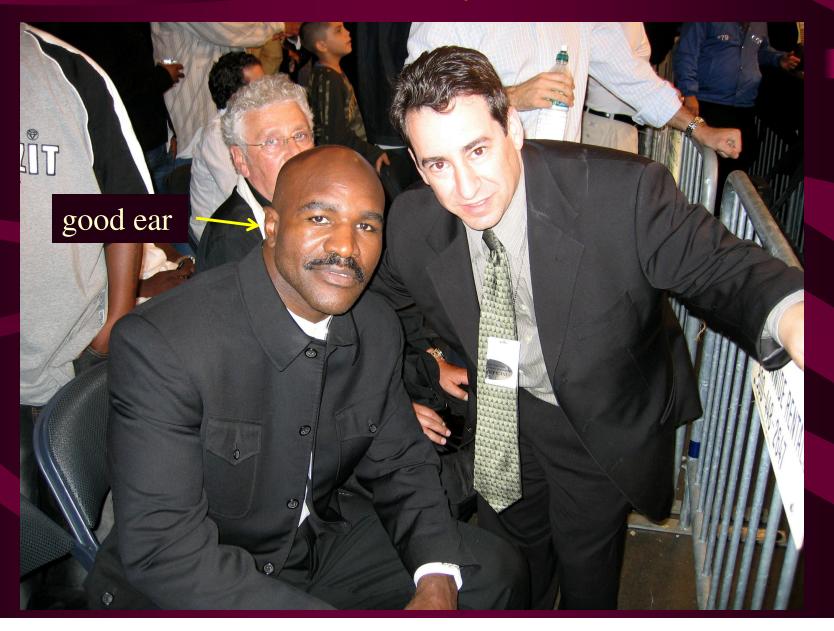
Cervical Subluxation



C-5 Fracture



Evander Holyfield

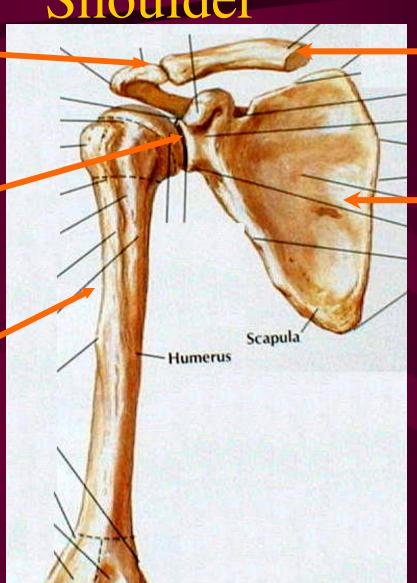


Acromioclavicular (A-C) joint

Shoulder joint

humerus





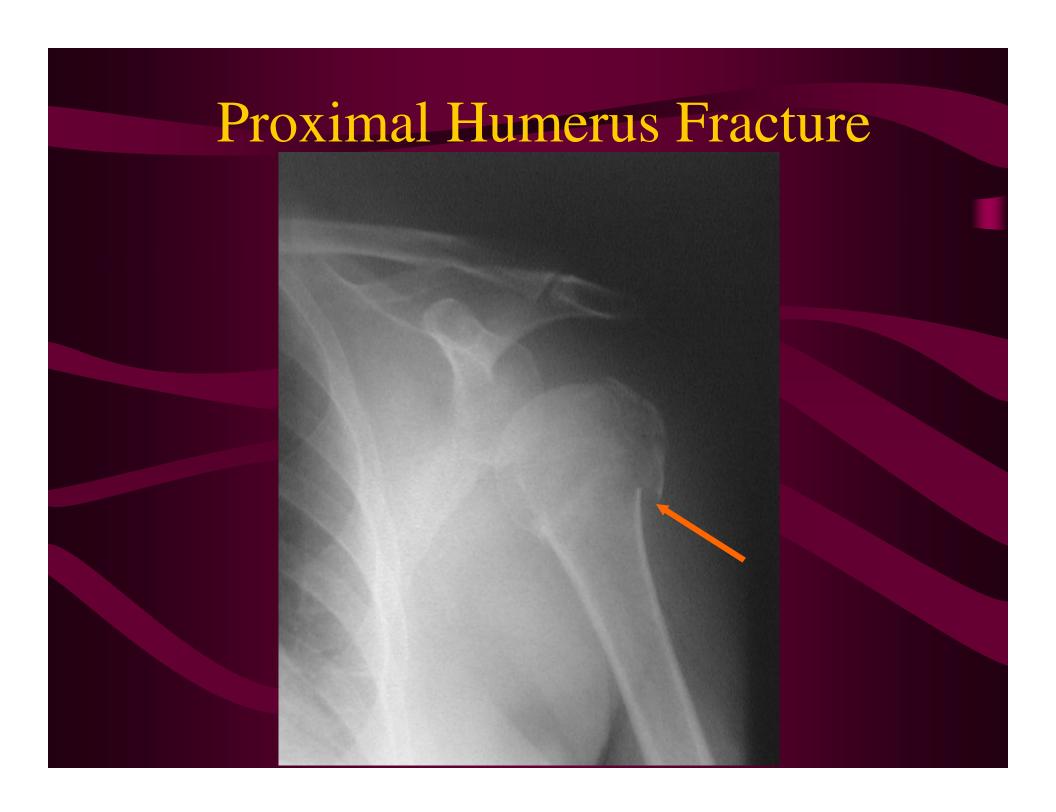
clavicle

scapula



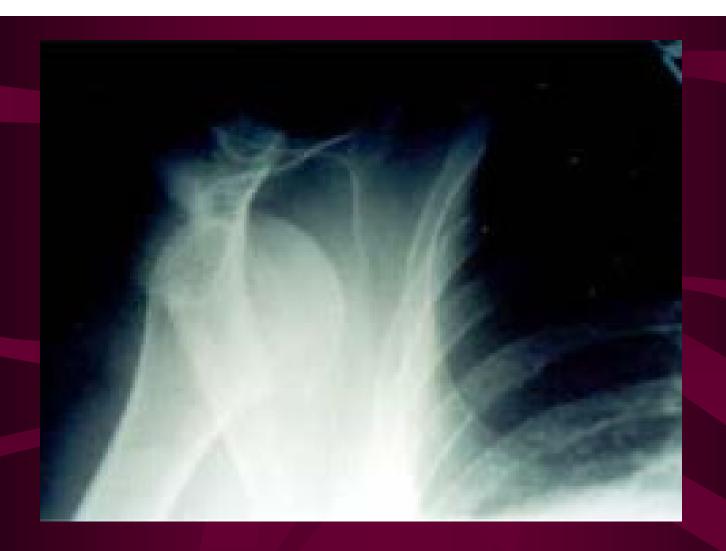
Clavicle Fracture





Shoulder Dislocation

- 95% dislocations are anterior
- Inability to lift arm
- Inability to bring arm across chest (touch other shoulder)
- May tear cuff!
 - Especially in boxers older than 40



Shoulder Dislocation

George "Skinless" Jones



Shoulder Anatomy - Muscles

deltoid

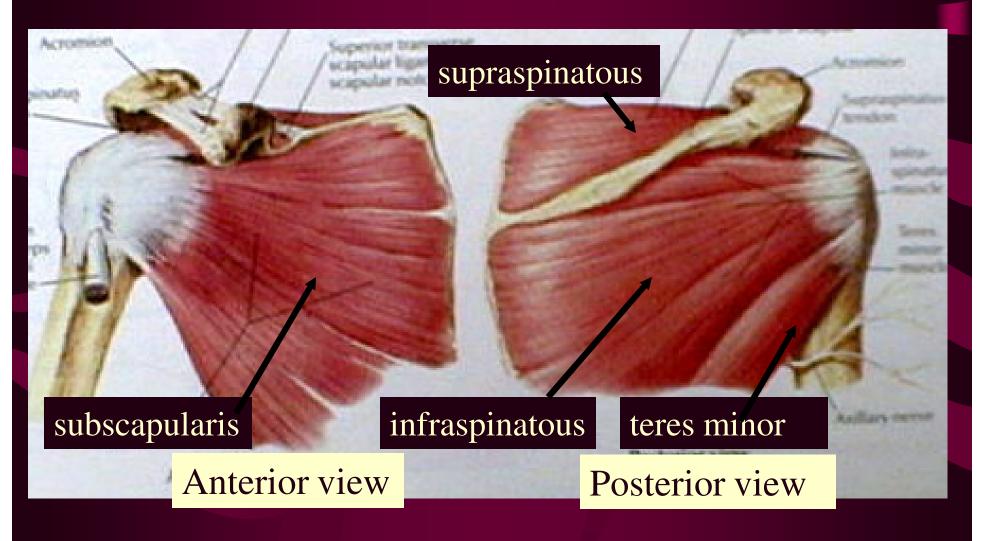
trapezius

pectoralis major

Rotator Cuff

- 4 muscles SITS
 - Supraspinatous
 - Infraspinatous
 - Teres Minor
 - Subscapularis
- Depress shoulder and stabilize joint

Rotator Cuff Muscles

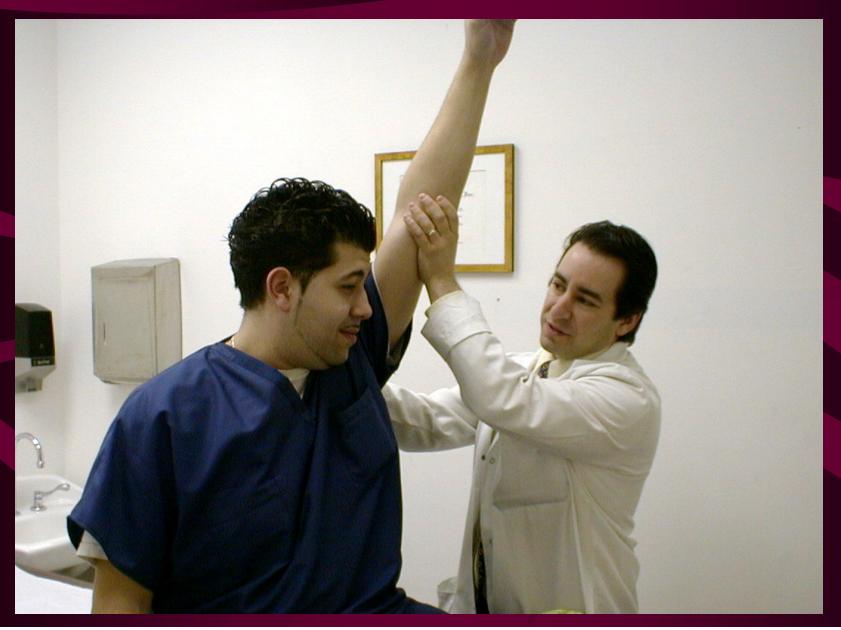


Rotator Cuff Tendonitis/Impingement

Definition

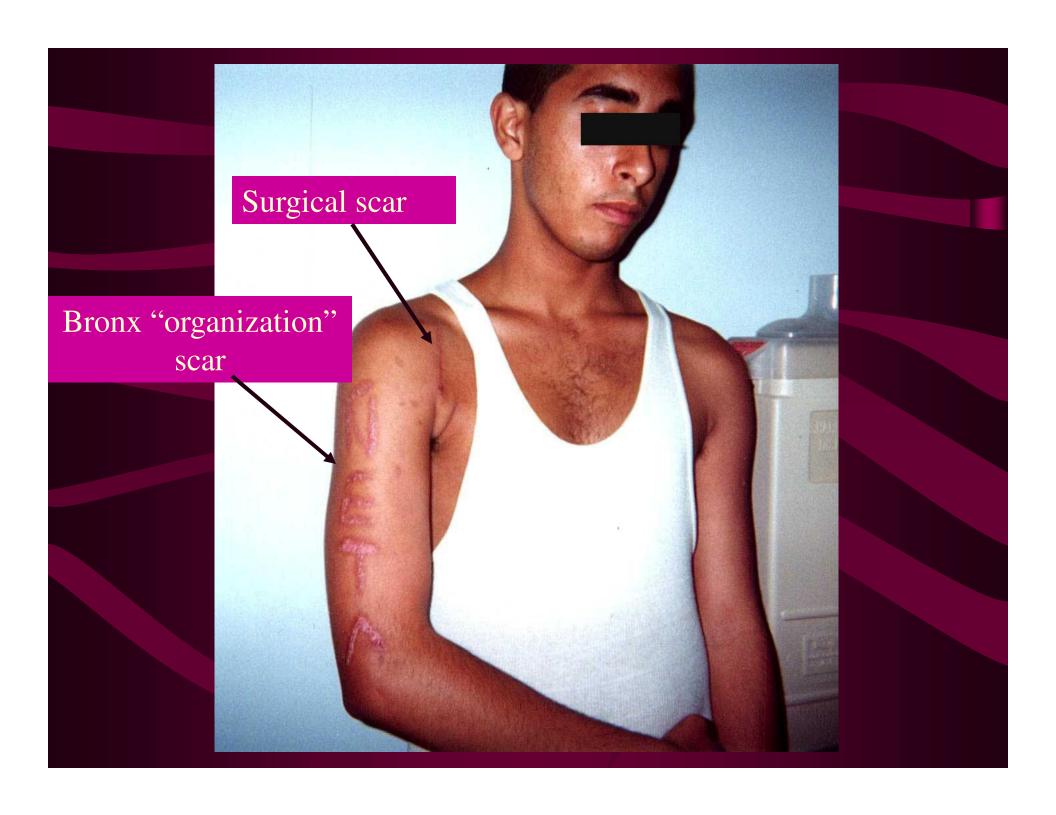
- Crushing of rotator cuff muscles between acromion and humeral head (within subacromial space)
- More likely in boxers older than 35-40 years old

Impingement sign



Rotator Cuff Injury - Exam

- ROM forward flexion, abduction, external rotation, internal rotation (vs. contralateral)
- Impingement sign/test
- Test all muscles especially rotator cuff
- Rule-out other pathology
 - c-spine



Supraspinatous test



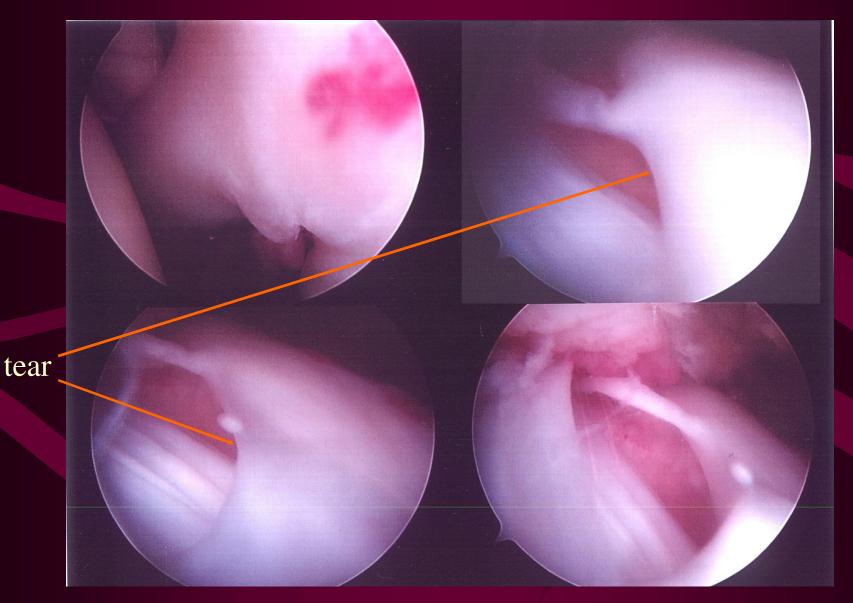
- 90° abduction
- 30° forward flexion
- Full internal rotation

ER strength

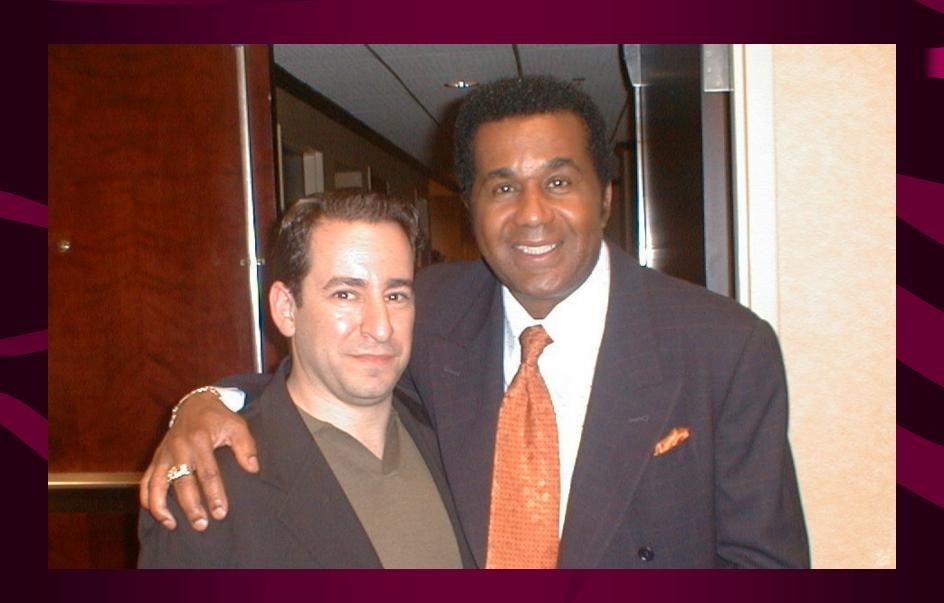


- Elbow 90° against side
- 45° internal rotation

Rotator Cuff Tear



Emanuel Steward



"Boxer's Fracture"

- Fracture of 4th or 5th metacarpal
- Not common in professional boxers

"Boxer's Fracture"







Professional Boxer's Fracture

- Fracture of 2nd or 3rd metacarpal
- More typically in professional boxers
- Usually dominant hand

Professional Boxer's Fracture



Bennett's Fracture (Base Thumb)



Ruling-Out Fractures

- Acute
 - Tender to palpation
 - Obvious deformity (rotation/bend)
 - Crepitus/pain with motion
- Sub-acute
 - Ecchymosis/swelling
 - tenderness

Ruling-Out Fractures

Only way to rule-out fracture 100% is with appropriate x-rays!

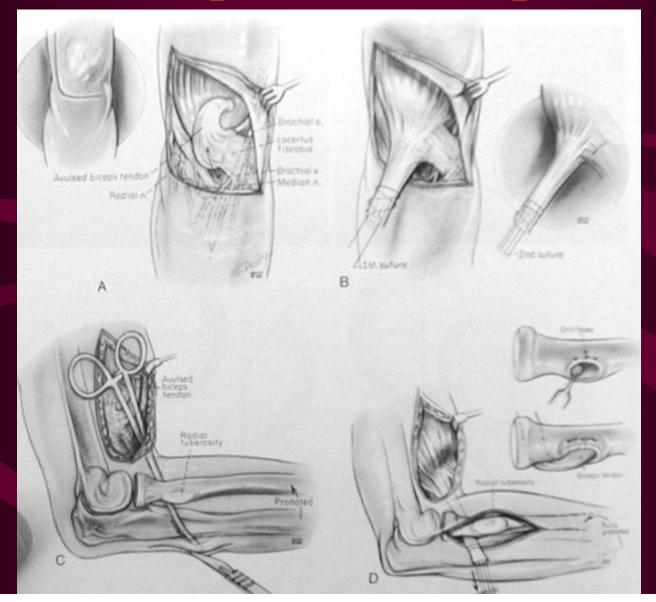
Distal Bicep Tendon Rupture

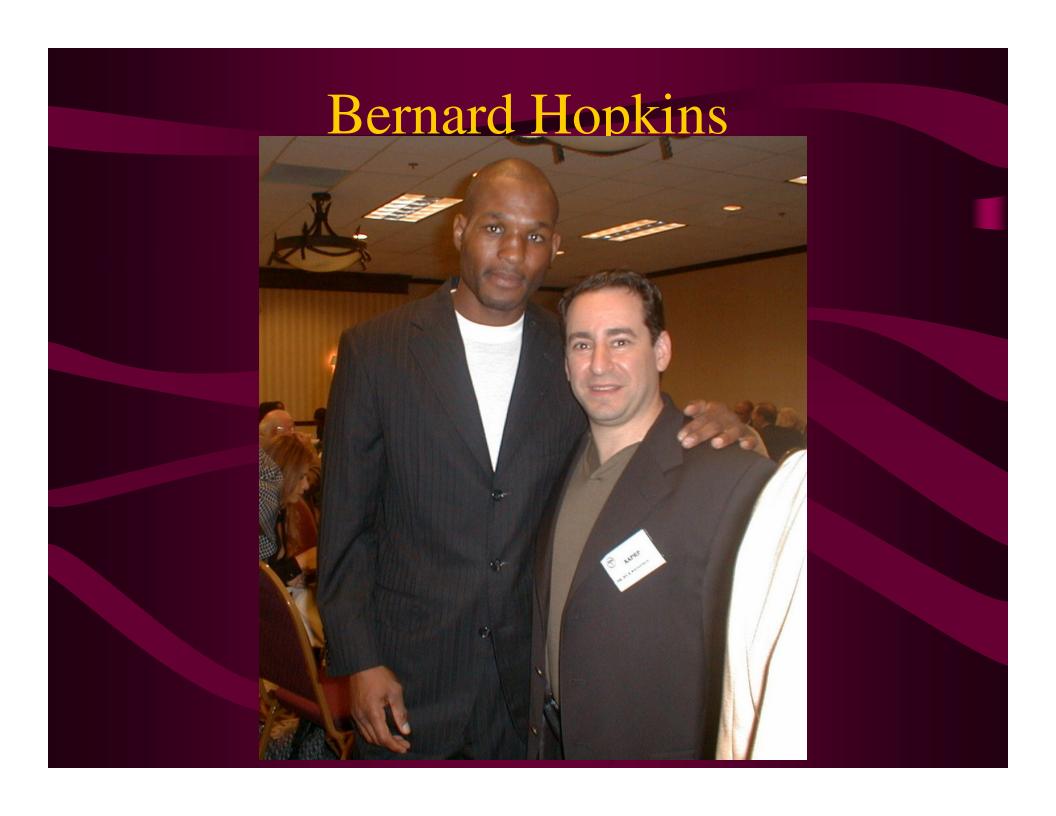
- Pain/tenderness in anterior elbow
- Defect and retracted bicep muscle (popeye sign)
- Weak elbow supination/flexion

Distal Bicep Rupture



Bicep Tendon Repair



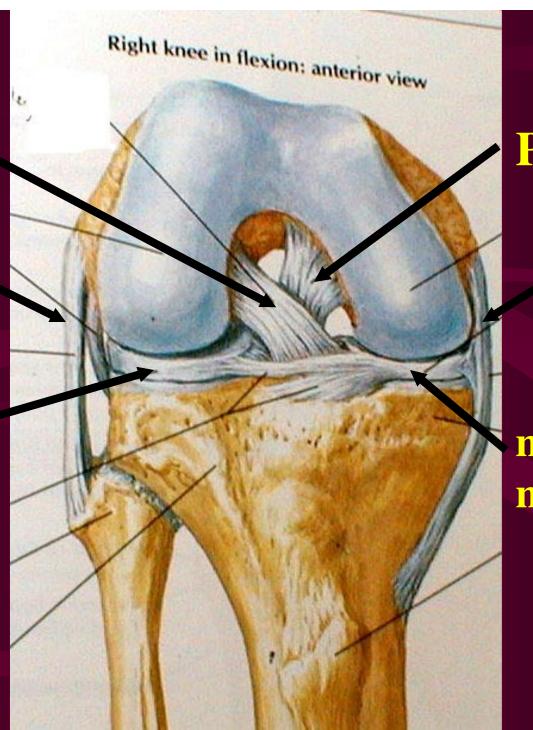


Knee Anatomy

- 4 important ligaments
 - ACL resists ant translation and hyperextension
 - PCL resists post translation
 - MCL resists valgus
 - LCL resists varus

ACL LCL

lateral meniscus

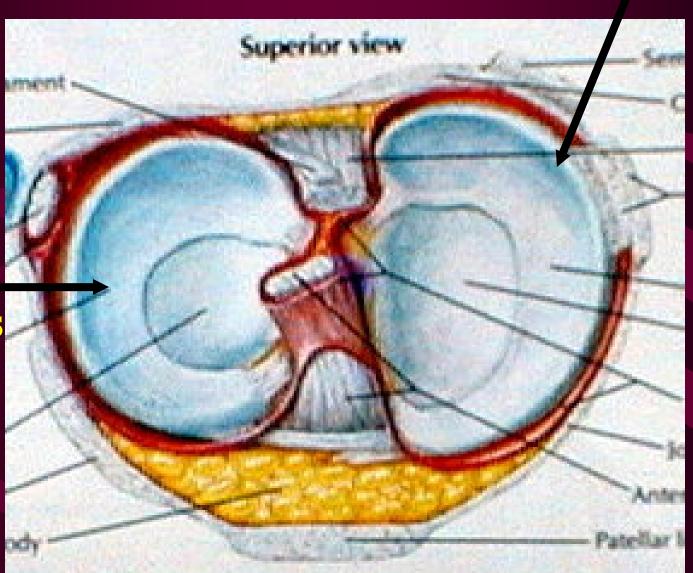


PCL
MCL

medial meniscus

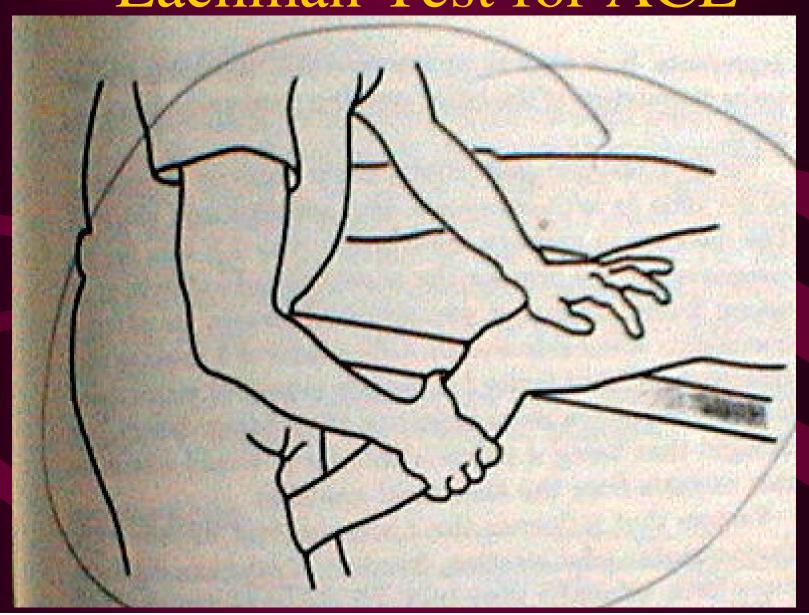
Menisci of the Knee

medial meniscus

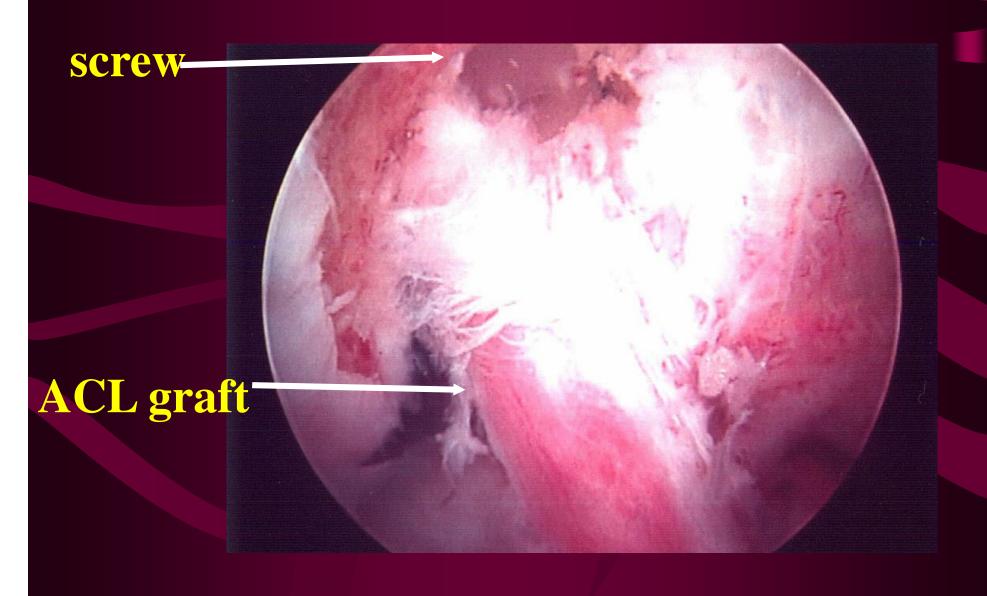


lateral meniscus

Lachman Test for ACL

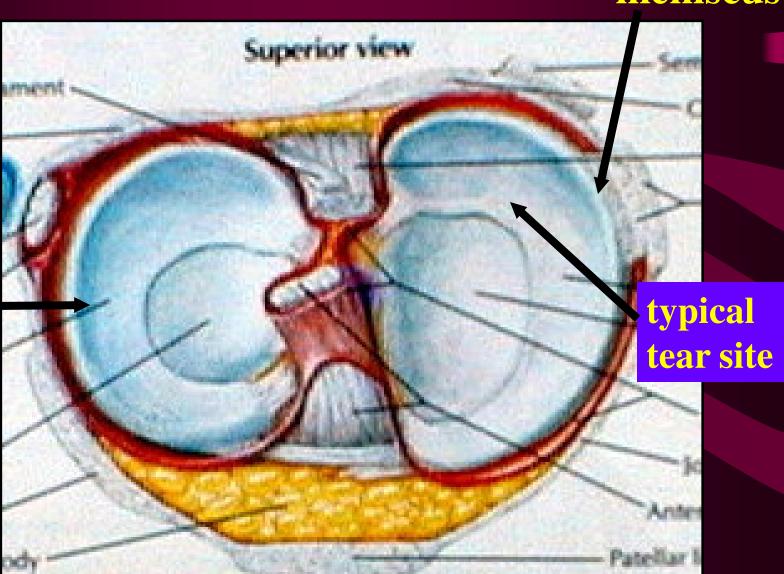


ACL Reconstruction



Menisci of the Knee

medial meniscus



lateral meniscus

Physical Exam - Meniscus

- Joint line tenderness
- McMurray flexion rotation test
- Flexion pinch test
- Pain with squatting

Meniscus Tear

condyle

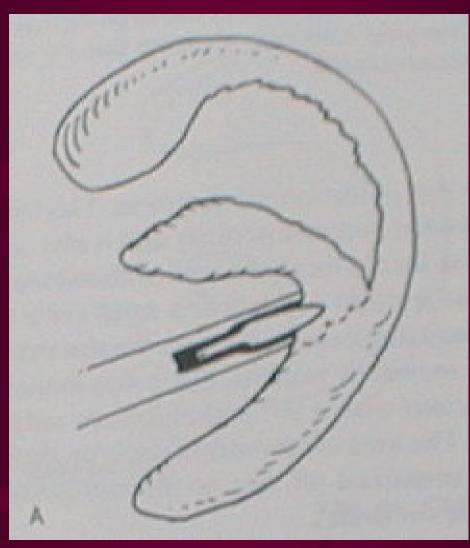
torn piece

meniscus

tibia

med fem

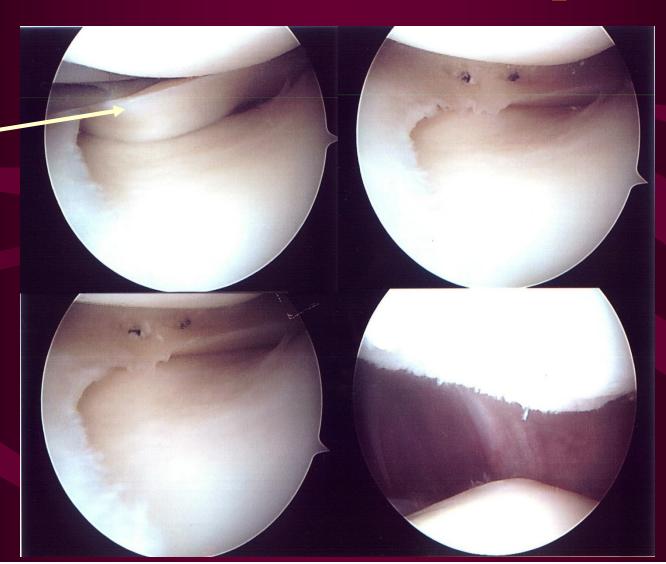
Partial Meniscectomy





Meniscus Tear and Repair

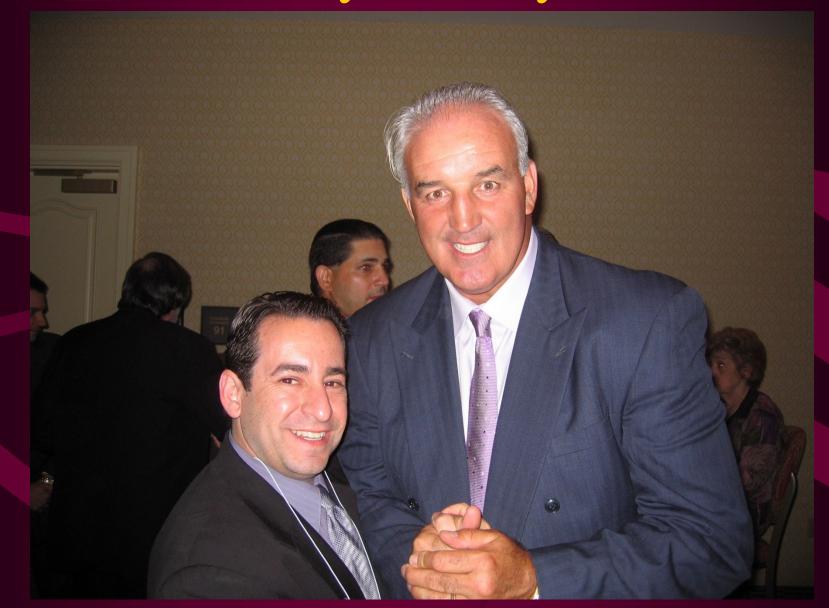
medial meniscus tear



Arthroscopy Portal Scars



Gerry Cooney



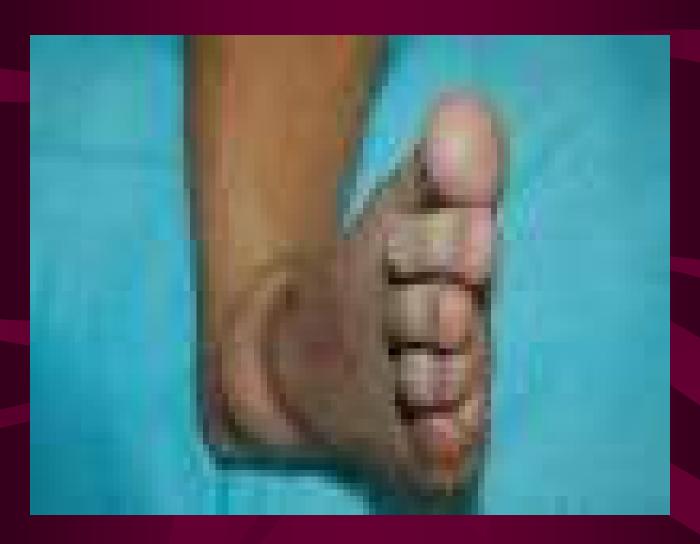


- Typically inversion injury
- Lateral ankle sprain is most common

Ottawa Rules for Ankle Fractures

- Able to bear-weight on affected foot
- Able to take 3 steps unassisted
- No bony tenderness at posterior lateral malleolus

n.b.-must be fully conscious to apply rules



Ankle Dislocation

Bimalleolar Ankle Fracture



Orthopaedic Pearls

- Immobilize/Protect suspected c-spine injuries
- Firmly palpate any suspected injured areas
 - Check ROM and strength
 - Pre-fight exam always push on MPs and check finger extension
- Compare to contralateral extremity
- Deep squat to test knee

Senator John McCain



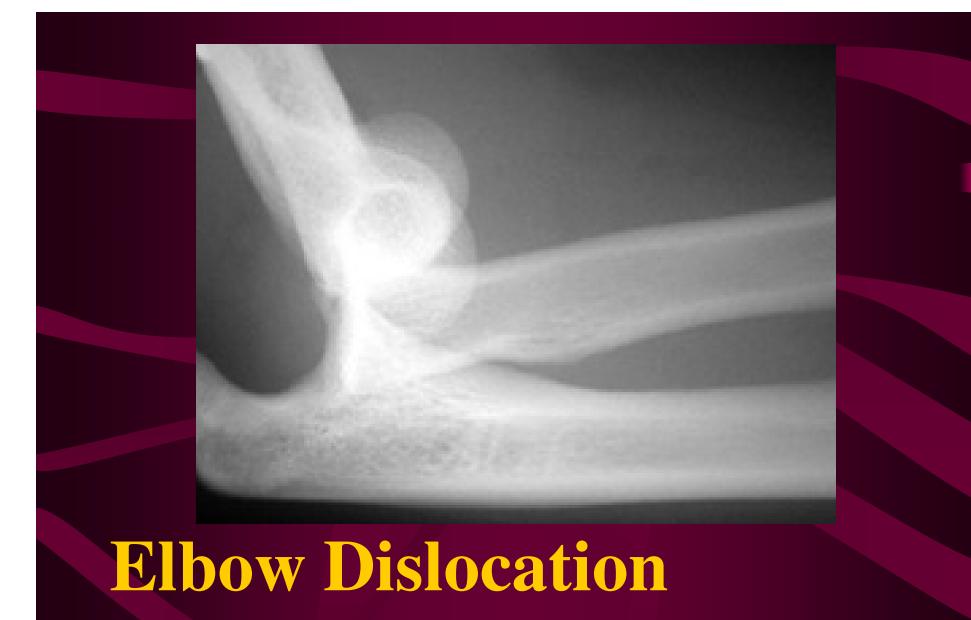
 http://www.youtube.com/watch?v=HbejYe HwBVc

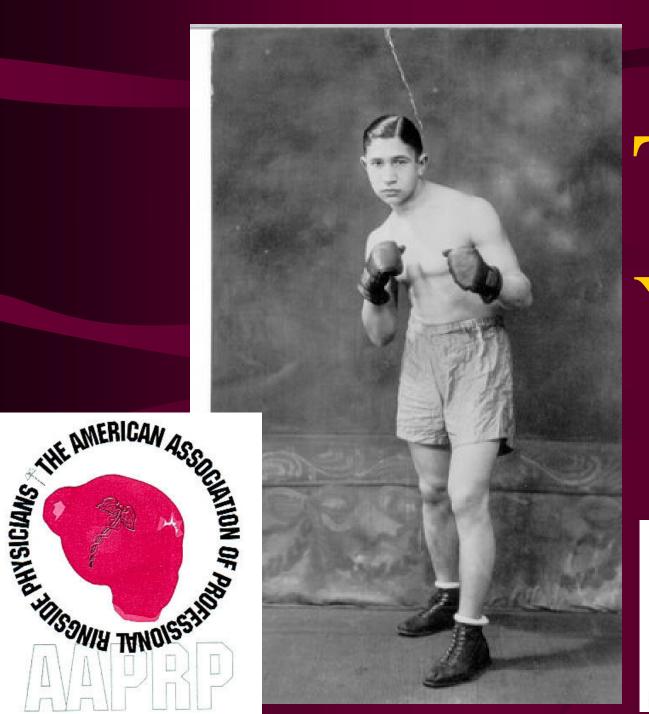
Mixed Martial Arts Injuries

- Joints are a weak point of the human body
- One of the basic tactics of MMA is to stress a joint to point of submission or dislocation



Finger Dislocation





Thank You!

