

A Non-Odontoid Non-Hangman Axis Fracture

Odontoid veya Hangman Olmayan Axis Kırığı

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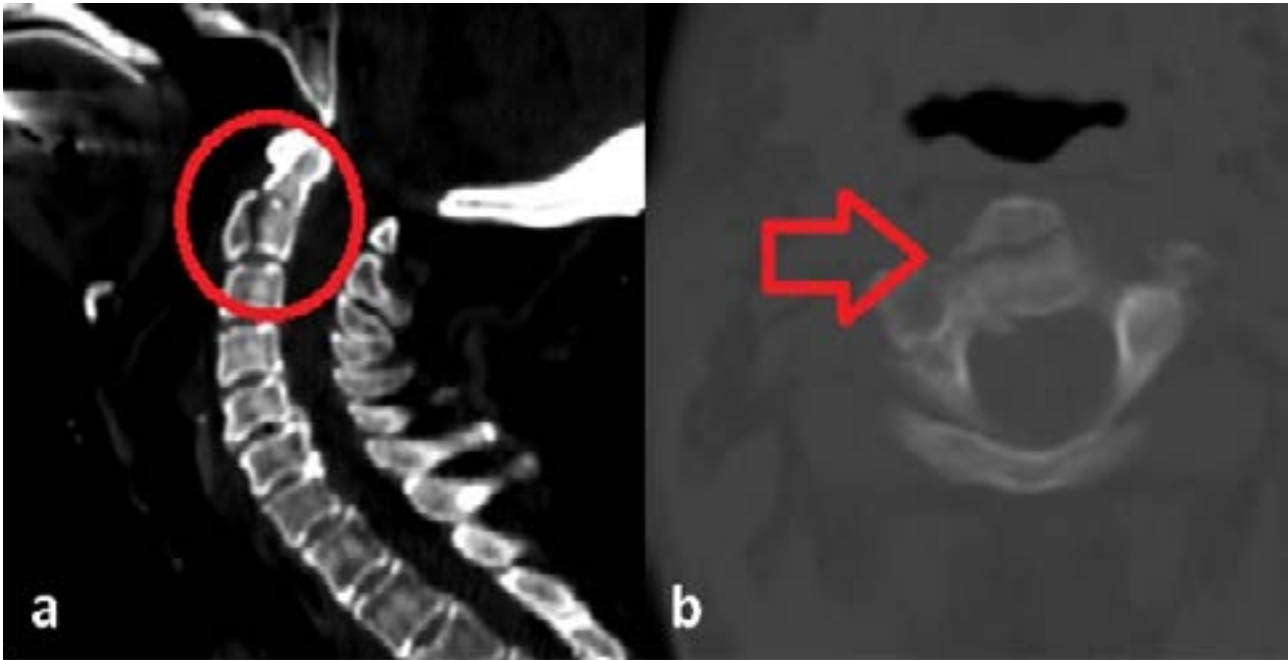


Figure 1: a) The sagittal reformatted image of cervical computed tomography b) The transverse reformatted image of cervical computed tomography

An 84-year-old female patient applied to the emergency service with neck pain. The patient fell lost in the bathroom. In the anamnesis of the patient, it is seen that she had diabetes mellitus, hypertension and no other history of disease. On her physical examination, the vital signs were within normal limits and there was tenderness on both scapula and midline tenderness on cervical vertebra. Computed tomography showed fragmented fracture on cervical second vertebral corpus. The patient was discharged with a collar and analgesics.

Axis fractures are classified into three groups. These are odontoid fractures, hangman fractures (traumatic spondylolysis) and non-odontoid non-hangman fractures (1). Odontoid and hangman fractures are relatively common fractures of the axis (1). Our case was non-odontoid non-hangman fracture which is the rarest type of axis fractures. In our case, conservative treatment was preferred because it was Benzel type 1 fracture and had no accompanying soft tissue injury (2).

Funding: We received no financial support for the research, authorship, or publication of this article.

Conflict of interest: We declare no conflict of interest.

Informed consent: We asked the patient to help us to publish the case report in an international journal for discussion, including disease symptoms, diagnosis, and image related content. The patient agreed us to use his medical records and signed the consent form.

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Cite as: Ozdemir S, Akca HS, Algin A. Non-Odontoid Non-Hangman Axis Fracture. Phnx Med J. 2021;3(2):95.

Received: .22.02.2021

Accepted: 10.03.2021

