

Editorial

## Wrist Arthroscopy in Children and Adolescents

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Since 1979, when Chen YC first published the paper on wrist arthroscopy<sup>1</sup> (although Dr Masaki Watanabe introduced 1.9-mm scope for the wrist for the patient in 1970), wrist arthroscopy has been popular and is now widely used both for diagnosis and treatment of wrist disorders. Most of the open surgical treatments of the wrist can be now transferred to the arthroscopic surgeries. Complications of wrist arthroscopy reported are few; however, severe complications, such as nerve and tendon laceration, local pain at the portal, skin burn due to radiofrequency or plasma device for synovectomy, cartilage damages on the radius or carpal bones, and infection or complex regional pain syndrome (CRPS), have also been reported. While introducing arthroscopy to a child less than 10 years of age or to an adolescent, the carpal bones and radius are mostly covered by the thick articular hyaline cartilage. There is a risk of articular cartilage damage while inserting trocar or surgical exploration, and once hyaline cartilage is damaged, its recovery may be difficult. Thus, wrist arthroscopy in a child or an adolescent is not popular and is performed in the limited institute where the wrist arthroscopy expert(s) belong(s).

This issue includes the “Special Review” of “Role of wrist arthroscopy in juvenile inflammatory arthritis” described by Ishwar et al. This review describes a case series of wrist arthroscopic synovectomy for juvenile arthritis with acceptable clinical results with pain relief, range of motion, and grip strength. The most important point in this article is no complications were observed after arthroscopic treatment; thus, it can be concluded that wrist arthroscopic surgery in a child and an adolescent is quite safe.

Interesting wrist papers, such as biomechanical analysis of screw strength, distal radius fracture treatment using bridge plate, total wrist fusion, DRUJ kinematic analysis, scaphoid nonunion, scapholunate dissociation, distal radius fracture, DRUJ prosthesis, wrist and carpal anatomy, systematic review of total wrist arthroplasty, and interesting case reports, are also included. Do not miss it.

### Reference

- 1 Chen YC. Arthroscopy of the wrist and finger joints. *Orthop Clin North Am* 1979;10(03):723–733

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