

## BACKGROUND

- Scapholunate widening: abnormal orientation of the scaphoid relative to the lunate; implies severe injury to the scapholunate interosseous ligament.<sup>1</sup>
- Most commonly results from trauma. Leading cause of scapholunate advanced collapse
- Characterized by > 4 mm on PA view

## CASE SERIES

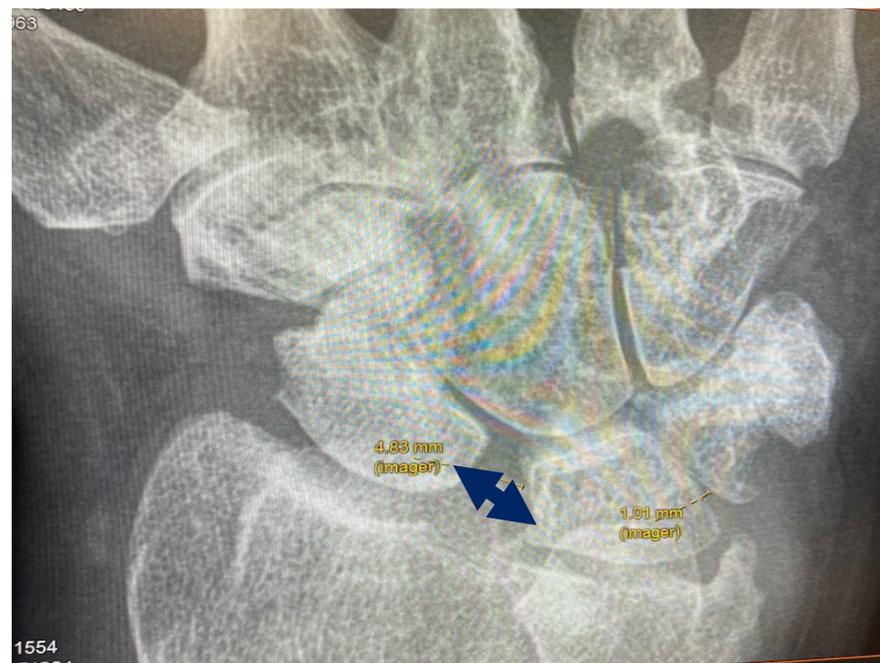
**Patient A:** 79 y.o M with right wrist pain. Imaging: severe arthritic changes in IP and MCP joints consistent with calcium pyrophosphate dihydrate crystal deposition disease (CPPD) and scapholunate joint space widening measuring 6 mm. Treatment: wrist splint.

**Patient B:** 61 y.o F with rheumatoid arthritis (RA) with wrist swelling and digit extension difficulty. Bilateral wrist imaging: scapholunate interval widening. Treatment: methotrexate and Enbrel.

**Patient C:** 57 y.o M with wrist pain and swelling. Imaging: erosions in the carpal bones, and metatarsal bases and distal phalanges, consistent with gout. Scapholunate joint space widening measured 4.86 mm. Treatment: prednisone taper and allopurinol.



**Figure 1: The arrow demonstrates the distance between the scaphoid and lunate: 6mm (Patient A)**



**Figure 2: The arrow represents the distance between the scaphoid and lunate: 4.86mm. (Patient C)**

## DISCUSSION

- Scapholunate widening usually occurs with trauma or osteoarthritis of the wrist. Rarely, it has been associated with RA and gout.
- Each etiology of scapholunate dissociation had unique management considerations, albeit with similar outcomes of symptom improvement.
- Identifying the etiology of scapholunate dissociation is critical to effectively manage wrist pain.

## CONCLUSION

Screening for scapholunate dissociation in the setting of various conditions (CCPD, RA, and gout) in patients with wrist pain is extremely important as etiology can determine a more specific treatment plan that better improves patient pain/function.

## REFERENCES

1. Daniels JM 2<sup>nd</sup>, Zook EG, Lynch JM. Hand and wrist injuries: Part I. Nonemergent evaluation. Am Fam Physician 2004; 69: 1941.
2. Dixon, Andrew, and Mohamed Saber. "Scapholunate Dissociation: Radiology Reference Article." Radiopaedia Blog RSS.
3. Nagle DJ. Evaluation of chronic wrist pain. J am Acad Orthop Surg 2000; 8:45.

