Reviewer's report

Title: Posterior Dislocation of the Elbow - Unusual presentation after a Total Hip Replacement - A case report

Version: 3 Date: 23 November 2007

Reviewer: Michael Carmont

I am familiar with the literature and believe that this case meets one of the 7 criteria for evaluation in the journal: An unexpected event in the course of observing or treating a patient

Has the case been reported coherently?: No

Is the case report authentic?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: No

Does the case report have explanatory value?: No

Does the case report have diagnostic value?: No

Will the case report make a difference to clinical practice?: No

Comments to authors:

General
The authors report an unusual event following total hip replacement - a posterior elbow dislocation.

My overall impression is that this is an interesting event however this report needs to be improved before it is suitable for publication.

Revisions necessary for publication

The background section states that the majority of elbow dislocations can be treated conservatively, it may seem pedantic but clearly the elbow should be reduced and I think this should be stated.

I feel second should be used instead of 2nd in the second paragraph.

In the case report, more history should be given. It is exceptionally unusual for a 27 year old to have osteoarthritis, the underlying cause should be highlighted more. I appreciate there are also underlying arterio-venous malformations in the
limb. Also body habitus may have played a role. I cannot see any soft tissue lines on the post operative pelvis radiograph. The femur has a narrow canal and the proximal femur is small suggesting lack of weight bearing during childhood and developmental problems.

The available imaging is poor. A figure of the dislocation would be useful rather than just the post reduction images. In the clinical setting of this case, this may not have seemed essential but for publication I think this is important. The post reduction films (good image) in my opinion show an abnormal contour of the capitellum and the radial head. Further imaging with computer tomography would be useful. There is also some lipping at the radio-capitellar joint suggesting longstanding changes.

I feel that the patient may have had a predisposition to elbow dislocation on account of the previously reported childhood injury. The dislocation may have been just a dislocation of the radial head in light of this. I understand the patient had been seen by an experienced upper limb surgeon who made the diagnosis but to publish the case a radiograph is important.

The literature review is good. The duration of follow up for Rasool’s paper would be useful.

The written text generally needs improving there are numerous use of Capitals Within The text which need altering to improve the paper.

Summary: reasonable message, I understand the restrictions with the numbers of figures but this paper could be considerably better.

What next?: Revise and resubmit

Quality of written English: Needs some language corrections before being published