| Fracture Eponym | Description | Comment |
| :---: | :---: | :---: |
| Aviator's | Vertical fracture of the neck of the talus with subtalar dislocation and backward displacement of the body | First described in flyers during World War I. Arises from forced dorsiflexion of the foot in flying accidents and in traffic accidents after a head-on collision |
| Barton's | Intra-articular fracture-dislocation of the wrist | Considered complicated and unstable. Requires surgical reduction in most cases. Described by Barton in 1838 before the advent of radiography |
| Dorsal Barton's | Oblique intra-articular fracture of the dorsal rim of the distal radius with displacement of the carpus along with the fracture fragment | Results from high-velocity impact across the articular surface of the radiocarpal joint, with the wrist in dorsiflexion at the moment of impact |
| Volar Barton's | Wedge-shaped articular fragment sheared off of volar surface of the radius (volar rim fracture), displaced volarly along with the carpus | Similar mechanism as dorsal Barton's but with wrist in volar flexion at time of injury. Also referred to as a reverse Barton's. Much more rare than dorsal Barton's |
| Bennett's | Oblique fracture through base of the first metacarpal with dislocation of the radial portion of the articular surface | Usually produced by direct force applied to the end of the metacarpal. Dorsal capsular structures disrupted by the dislocation. Marked tenderness along medial base of thumb |
| Boxer's | Fracture of the neck of the fourth or fifth metacarpal | Results from striking a clenched fist into an unyielding object, usually during an altercation, or against a wall, out of frustration or anger |
| Bosworth | Fracture-dislocation of the ankle resulting in the fibula being entrapped behind the tibia | Rare injury, produced by a severe external rotation force applied to the foot. Physical examination reveals foot severely externally rotated in relation to the tibia |
| Chance's | Vertebral fracture, usually lumbar, involving the posterior spinous process, pedicles, and vertebral body | Caused by simultaneous flexion and distraction forces on the spinal column, usually associated with use of lap seatbelts. Anterior column fails in tension along with the middle and posterior columns. May be misdiagnosed as a compression fracture |
| Chauffeur's | Solitary fracture of radial styloid | Occurs from tension forces sustained during ulnar deviation and supination of the wrist. Name derives from occurrence in chauffeurs who suffered violent, direct blows to the radius incurred while turning the crank on a car, only to have it snap back, during previous eras |
| Clay shoveler's | Fracture of the tip of the spinous process of the sixth or seventh cervical vertebra | First described in Australian clay shovelers who sustained a fracture of the spinous process by traction as they lifted heavy loads of clay |
| Colles' | Fracture of the distal radius with dorsal displacement and volar angulation; with or without an ulnar styloid fracture | Most common wrist fracture in adults, especially in the elderly. Results from fall on an outstretched hand. Also known as silver fork deformity, which accurately describes the gross appearance in the lateral view. First described by Colles in 1814, before the advent of radiography |
| Cotton's | Trimalleolar fracture | Fracture of the lateral malleolus, the posterior malleolus, and either a fracture of the medial malleolus or a disruption of the deltoid ligament with visible widening of the mortise on ankle radiograph |
| Dashboard fracture | Fracture of the posterior rim of the acetabulum | Named for mechanism of injury: a seated passenger striking the knee on a dashboard, driving the head of the femur into the acetabulum |
| Dupuytren's | Fracture-dislocation of the ankle | Results from a similar mechanism as the better known Maisonneuve fracture (i.e., external rotation of the ankle), resulting in either deltoid ligament rupture or medial |

malleolus fracture, diastasis of the inferior tibiofibular joint, and indirect fracture of the fibular shaft. Maisonneuve was the student of Dupuytren

| EssexLopresti | Fracture of radial head with dislocation of distal radioulnar joint | Results from longitudinal (axial) compression of the forearm |
| :---: | :---: | :---: |
| Galeazzi's | Fracture of the shaft of the radius with dislocation of the distal radioulnar joint. Ligaments of inferior radioulnar joint are ruptured and head of ulna displaced from ulnar notch of the radius | Results from fall on outstretched hand, with the wrist in extension and the forearm forcibly pronated. Inherently unstable with tendency to redisplace after reduction |
| Hangman's | Fracture-dislocation of atlas and axis, specifically of pars interarticularis of C 2 and disruption of $\mathrm{C} 2-3$ junction. Separation occurs between second and third vertebral bodies from anterior to posterior side | Results from extreme hyperextension during abrupt deceleration. Most common cause is the forehead striking the windshield of a car during a collision. A bit of a misnomer in that hanging usually produces death by strangulation rather than cord damage |
| Hume | Fracture of the proximal ulna associated with forward dislocation of the head of the radius | Essentially a high Monteggia injury |
| Jefferson | Burst fracture of ring of C 1 , or atlas | Axial loading results in a shattering of the ring of the atlas. Decompressive type of injury. Associated with disruption of transverse ligament; an unstable injury |
| Jones' | Transverse fracture of the metatarsal base, occurring at least 15 mm distal to the proximal end of the bone, distal to the insertion of the peroneus brevis | Should not be confused with the more common avulsion fracture of fifth metatarsal styloid, produced by avulsion at the insertion of the peroneus brevis. Jones described the fracture that bears his name in 1902, after suffering the injury himself, while dancing |
| Le Fort | Maxillary fracture | Types I, II, and III (see Chapter 39 ) |
| Le FortWagstaffe | Avulsion fracture of the anterior cortex of the lateral malleolus | Rare pull-off injury of the fibular attachment of the anterior tibiofibular ligament |
| Lisfranc's | Fracture located around the tarsometatarsal (Lisfranc's) joint, usually associated with dislocation of this joint | Lisfranc, a field surgeon in Napoleon's army, described an amputation performed through the tarsometatarsal joint in a soldier who caught his foot in a stirrup when he fell off his horse. Since then, the joint has borne his name |
| Maisonneuve | Fracture of proximal third of fibula associated with rupture of the deltoid ligament or fracture of the medial malleolus and disruption of the syndesmosis | Results from external rotation of the ankle with transmission of forces through syndesmosis; proximally the force is relieved by fracture of the fibula. Described experimentally in 1840, before radiography |
| Malgaigne | Fracture of the ilium near the sacroiliac joint with displacement of the symphysis; or a dislocation of the sacroiliac joint with fracture of both ipsilateral pubic rami | Resultant pelvic injury is unstable. Described by Malgaigne, based on clinical findings, in 1847 |
| March | Fatigue, or stress, fracture of the metatarsal | Arises from long marches or other repetitive use trauma (e.g., marathon running) or less commonly from single stumbling movements |
| Monteggia's | Fracture of the junction of the proximal and middle thirds of the ulna associated with anterior dislocation of the radial head | Usually caused by fall on outstretched hand along with forced pronation of forearm or by a direct blow on the posterior aspect of the ulna. Reported by Monteggia in 1814 |
| Nightstick | Fracture of either ulna or radius, or both | Name derived from a citizen's attempt to protect himself from a police officer's baton or "nightstick" by offering the forearm |
| Piedmont fracture | Closed fracture of the radius at the middle third/distal third junction, without associated ulnar fracture | Named for a series of cases presented at the Piedmont Orthopaedic Society of Durham, North Carolina |


| Pott's | Definitions vary (see comment); most commonly a <br> bimalleolar fracture or a fracture of the distal fibula, 4-7 <br> cm above the lateral malleolus | The exact fracture Pott described in 1769 is uncertain; clearly it referred to a fracture of <br> the lower fibula, usually associated with other fractures or dislocations about the ankle |
| :--- | :--- | :--- |
| Rolando's | Intra-articular fracture at base of metacarpal. Frequently <br> Y-or T-shaped, or may be severely comminuted | Produced by an axial load with the metacarpal in partial flexion. Worse prognosis than a <br> Bennett's fracture and, fortunately, more rare |
| Salter-Harris | An epiphyseal fracture occurring in children or <br> adolescents | Graded I-V, depending on degree of involvement and/or displacement of epiphysis and <br> metaphysis (see text dealing with Salter-Harris fractures and also Figure 46-1) |
| Stener | Avulsion of the ulnar corner of the base of the proximal <br> phalanx of the thumb | Bony equivalent of rupture of the ulnar collateral ligament, or "gamekeeper's thumb" |
| Smith's | Extra-articular fracture of the distal radius with volar <br> displacement of distal fragment | Reverse of the Colles' fracture but much more uncommon. Sometimes referred to as a <br> "garden spade" deformity. Usually results from fall with force to back of hand. First <br> described by Smith in 1847 |
| Teardrop | Wedge-shaped fracture of the anteroinferior portion of <br> the vertebral body, displaced anteriorly | Commonly involves a ligamentous injury and may produce neurologic injury |
| Thurston <br> Holland's <br> fragment | Triangular metaphyseal fragment that accompanies the <br> epiphysis in Salter-Harris type II fractures | Described by Thurston Holland in 1929. Commonly hyphenated, although technically it <br> should not be |
| Tillaux | Isolated avulsion fracture of the anterolateral aspect of <br> the distal tibial epiphysis | Occurs in older adolescents (12-15 years old) after the medial parts of the epiphyseal <br> plates close, but before the lateral part closes. External rotation force places stress on <br> anterior talofibular ligament. Described by Tillaux in 1872 |

