

Surprise finding: A biological airbag

It's common practice for specifically trained WorkSafeBC physicians to perform examinations on injured workers who suffer residual impairment following medical investigations and treatment. The objective of these exams is to document clinical findings associated with permanent functional impairment, such as restricted range of motion, a compromised neurovascular system, or a deformity consistent with the condition or conditions accepted under the claim. Ultimately, the goal is to expedite the calculation of a long-term disability award.

However, in one recent case involving a patient with a permanent functional impairment, the doctor's examination yielded a surprise finding.

The injury

While at work a 45-year-old, 162 cm, 76 kg, right-handed female stevedore found herself crushed between a 4500 kg container and a bulkhead. She was trapped and hypoxic for 2 minutes.

Initially, the worker was intubated. She had no obvious neck or upper- or lower-limb injury. Her chest was normal. Her pelvis was stable in both vertical and rotational compressing, and she showed no evidence of a perineal injury. Her urinary catheter indicated the presence of blood-tinged urine. Upon examination, her rectum was normal.

An imaging of the pelvis indicated the patient was suffering from a right pubic ramus fracture. However, the sacroiliac (SI) joint looked symmetrical.

A CT scan of the abdomen revealed, as follows:

- A normal liver and spleen; normal kidneys.
- Multiple large fibroids in the uterus.
- An undisplaced fracture through the right superior and inferior pubic rami.
- An undisplaced fracture involved the right L5 transverse process and partial sacralization of the L5.
- An undisplaced fracture extended vertically through the left sacral ala and into the S1 and S2 sacral foramina and the posterior aspect of the sacroiliac joint.
- A small avulsion fracture on the sacral side of the joint.

A year after the surgery, surgeons removed a 10 kg fibroid—the size of a football—from the patient's uterus. (See pictures below).



Three years postinjury, this individual demonstrated a significant recovery:

- She was working as a first aid attendant.
- She was able to do all her housework and yard work, although she had to pace herself.
- She rode a bike for transportation and was doing modified yoga and swimming, as well as weight training and cardio training.
- She was no longer able to run on a hard surface, because she found the impact painful.
- She had occasional urethral spasm, but no incontinence of urine or stool.
- She had dyspareunia and numbness in the vulva area and perineum, sparing the anus.

Permanent functional impairment examination

The examination found that the worker demonstrated a normal gait, toe walking, heel walking, and squat, and had mildly decreased range of motion of the hips and lumbar spine.

The worker and disability awards medical advisor credited the presence of the fibroid with stabilizing the worker's pelvic fractures and preventing organ injury or death.

—Janet Friesen, MD, CIME

Don't forget to register for the annual WorkSafeBC Physician Education Conference, 20 October in Nanaimo.

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