It is an easy and fast technique. Moreover, suturerelated bulging at the tendon ends is avoided, thus enabling the tendon to glide more easily within the tendon sheath.

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An Easy Way of Harvesting Olecranon Bone Graft in Adults by Using Bone Biopsy Trephine

To the Editor:

The olecranon is a useful donor site for bone grafts in upper extremity surgery because of its minimal donor site morbidity, proximity to the recipient site, ease of adjusting volume and shape, and adequacy of the cancellous bone.^{1,2}

For this purpose, we used a T-shaped bone biopsy trephine to harvest corticocancellous or cancellous

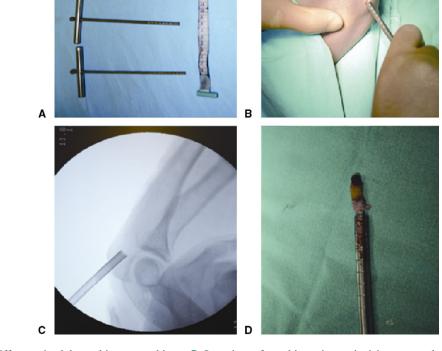


FIGURE 1: A Different-sized bone biopsy trephines. **B** Insertion of trephine via an incision over olecranon. **C** Intraoperative radiographic view of the trephine in the olecranon. **D** Harvested bone graft.

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622

bone graft from the olecranon successfully in 16 patients with complicated hand and wrist fractures (Fig. 1). Mean patient age was 27 years (range, 22–36 y). We make a small skin incision over olecranon and then incise and elevate the periosteum. We insert the trephine along the axis of ulna and rotate it to obtain the desired graft length. The trephine is then extracted by rotating in the same direction. The graft is gently pushed wire out of the trephine with a Kirschner wire. Mean operation time from skin incision to closure was 5 minutes (range, 3–7 min). No postoperative elbow immobilization was needed. Patients started resting on the elbow after 10 days. There were no pathologic fractures, contour deformities, or sensory or motor deficits.

Fujita et al³ used a skin trephine to harvest iliac crest bone in children, but this fragile trephine would not likely work in compact adult bone. Burstein et al⁴ also compared the use of special bone trephines with the other graft-harvesting techniques in children. They noted that the trephine technique had less morbidity than conventional harvesting techniques while providing adequate bone for alveolar bone grafting. We decreased operation time, postoperative pain, and scar length without disturbing elbow movement or sensation. Our patients were young and had good bone stock. Bone density could be assessed in older patients to help assess the risk for pathologic fractures.

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