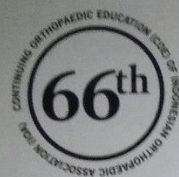


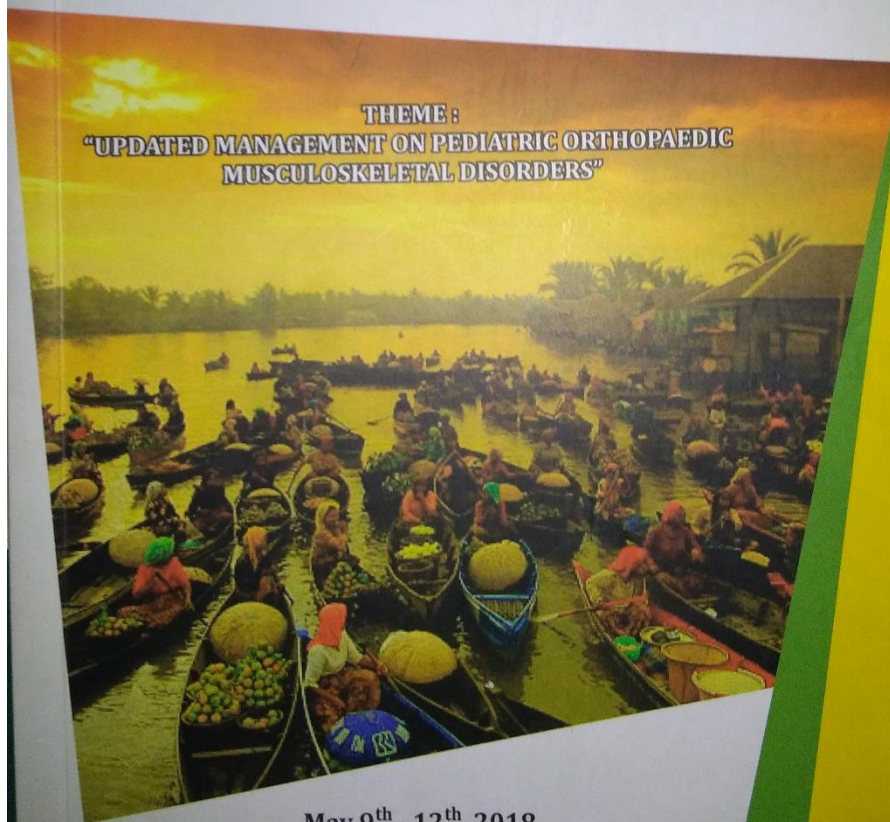


# PROCEEDING



# PROGRAM AND PROCEEDING BOOK

THEME :  
"UPDATED MANAGEMENT ON PEDIATRIC ORTHOPAEDIC  
MUSCULOSKELETAL DISORDERS"



May 9<sup>th</sup> - 12<sup>th</sup>, 2018  
Golden Tulip Galaxy Hotel Banjarmasin  
South Kalimantan - Indonesia

DAFTAR FREE PAPER & POSTER - COE KE 66  
HOTEL GOLDEN TULIP GALAXY, BANJARMASIN  
9 - 12 MEI 2018

Wednesday, May 9, 2018

FREE PAPER Oral Presentation Group A - Venus 3 (2<sup>nd</sup> Floor) - BASIC SCIENCE

Juries :

1	Prof. dr. Putu Astawa, SpOT(K)	
2	Dr. dr. Achmad Fauzi Kamal, SpOT(K)	
1	08.00 - 08.08 Upper Cervical Schwannoma : A Case Report	Steesy Benedicta
2	08.08 - 08.16 Clinical efficacy of tranexamic acid in scoliosis correction surgery	Toto Surya Efar
3	08.16 - 08.24 Comparison of Behavior in Tablet Computer Using on Cubital Tunnel Incident	Helmi Ismuhandhar
4	08.24 - 08.32 Atypical Musculoskeletal Manifestations of gout in Hyperuricemia Patients	Jansen
5	08.40 - 08.48 Outcome Following Cervicothoracic Junction Fusion in T1 Pathological Fracture of Breast Cancer Spinal Metastases: A Case Report	Ni Made Puspa Dewi Astawa
6	08.48 - 08.56 Effect of Amnion Membrane on Function and Histopathology The Sciatic Nerve with Nerve Crush Injury in Sprague Dawley Rat	Bagus Jati Nugroho
7	08.56 - 09.04 Effectiveness of Using Rifampisin Combination Therapy with Quinolon on Chronic Osteomyelitis: Case Series Study	Arius Suwondo
8	09.04 - 09.12 Comparison of Histological Findings After Kirschner Wire Insertion Using Different Drilling Methods: An Experimental Study in Rabbit	Anita Kurniawati
9	09.12 - 09.20 Correction of Severe Valgus Deformity with Non-Constraint Total Knee Arthroplasty Implant	Andre Yanuar
10	09.20 - 09.28 Adductor Canal Block as a Promising Solution for Post-TKA Pain	Rusendi Hidayat
11	09.28 - 09.36 Proximal Radius Osteotomy, Fascial Flap Interposition, and Mesh Silk Interposition in Patient with Recurrent Congenital Synostosis of the Proximal Radioulnar : A Case Report	Dea Prista Agatha
12	09.36 - 09.44 The Effectiveness of 8 degree Laterally Wedged Insoles to Reduce Pain in Patient with Bilateral Medial Compartment Osteoarthritis of The Knee: Clinical Trial Study	Rovy Pratama
13	09.44 - 09.52 Fracture Healing of Pubic Rami after Debridement-Sequestrectomy: A Case Report	G. Agung Krisna Yudha
14	10.00 - 10.08 COFFEE BREAK	Brilliant Citra Wirashada
15	10.08 - 10.16 Low Tibial and Fibular Osteotomy for Treating Varus-Type Post Traumatic Ankle Osteoarthritis(Case Report)	
16	10.16 - 10.24 Vitamin D deficiency in idiopathic scoliosis patients	Toto Surya Efar
17	10.24 - 10.32 Bilateral Streeter Dysplasia Post Multiple Z Plasty One Stage and Debulking : A Case Report	Ahmad Ramdani
18	10.32 - 10.40 Experience with Antibiotic Articulating Spacers for PJI Infected Total Knee Arthroplasty in Santosa Hospital Bandung : Case Report	Chusnanto
19	10.40 - 10.48 Case Report: The Tikhoff-Unberg Procedure in the Treatment of Alveolar Rhabdomyosarcoma of Scapula	Achmad Jachja
20	10.48 - 10.56 Proximal Fibular Osteotomy Procedure in Patients with Knee Osteoarthritis at Tarakan Hospital	Rosihan Effendi
21	10.56 - 11.04 Metastatic Hodgkin Lymphomas To The Bone	Dwi Septwa Rustaminta
22	11.04 - 11.12 A Serial Initial Case : Functional Outcomes Tibio-Talo-Calcaneal Fusion with Reversed Expert Tibial Nail a Short Term Study	Tarigan
23	11.12 - 11.20 Mini-open incision technique for the Tendo Achilles Tenotomy (TAT) in treatment of idiopathic Clubfoot to reduce a risk of neurovascular injury and achieved maximum equinus correction	Charles A Simanjuntak
24	11.20 - 11.28 The Effects of Simvastatin Administration to the Serum Alkali Phosphatase Activity in Rats (Rattus Novergicus) Wistar Strain Femur Fractures with Dyslipidemia	Anggi Fauziani
25	11.28 - 11.36 Open Reduction Internal Fixation With Plate and Screw In Pediatric Hip Fracture: A Case Report	Hermansyah
26	11.36 - 11.44 Management of Post Traumatic Wound Infection of Proximal Medial Femur with Vertical Rectus Abdominis Myocutaneous (VRAM) Flap	Andri Feisal Nasution
27	11.44 - 11.52 Stable Left Slipped Capital Femoral Epiphysis with Bilateral Genu Valgus in Twelve Years Old Male Treated with In-Situ Fixation and Right Prophylaxis Screwing of Femoral Capital Epiphysis	Gusti Ngurah Putra Stamu
	Posterior Approach Nerve Transfer of the Spinal Accessory to Suprascapular Nerve in	Sanny Wijanarka
		Dhinta Feribsyia Chita
		Shanika Limena

## FrP-A 03

## COMPARISON OF BEHAVIOR IN TABLET COMPUTER USING ON CUBITAL TUNNEL INCIDENT

Ismunandar H, Arsa W, Ramdan A  
 Department of Orthopaedics and Traumatology  
 Faculty of Medicine Universitas Padjadjaran  
 Dr. Hasan Sadikin General Hospital

## ABSTRACT

**Background:** The Smart device utilization continues to increase exponentially. Nowadays, people spend more time with their smart phone. Length of usage time and bad posture increase the risk of cellphone elbow (cubital tunnel syndrome) incident.

**Method:** This is an observational study with cross-sectional design. Primary data were obtained by distributing the questionnaires.

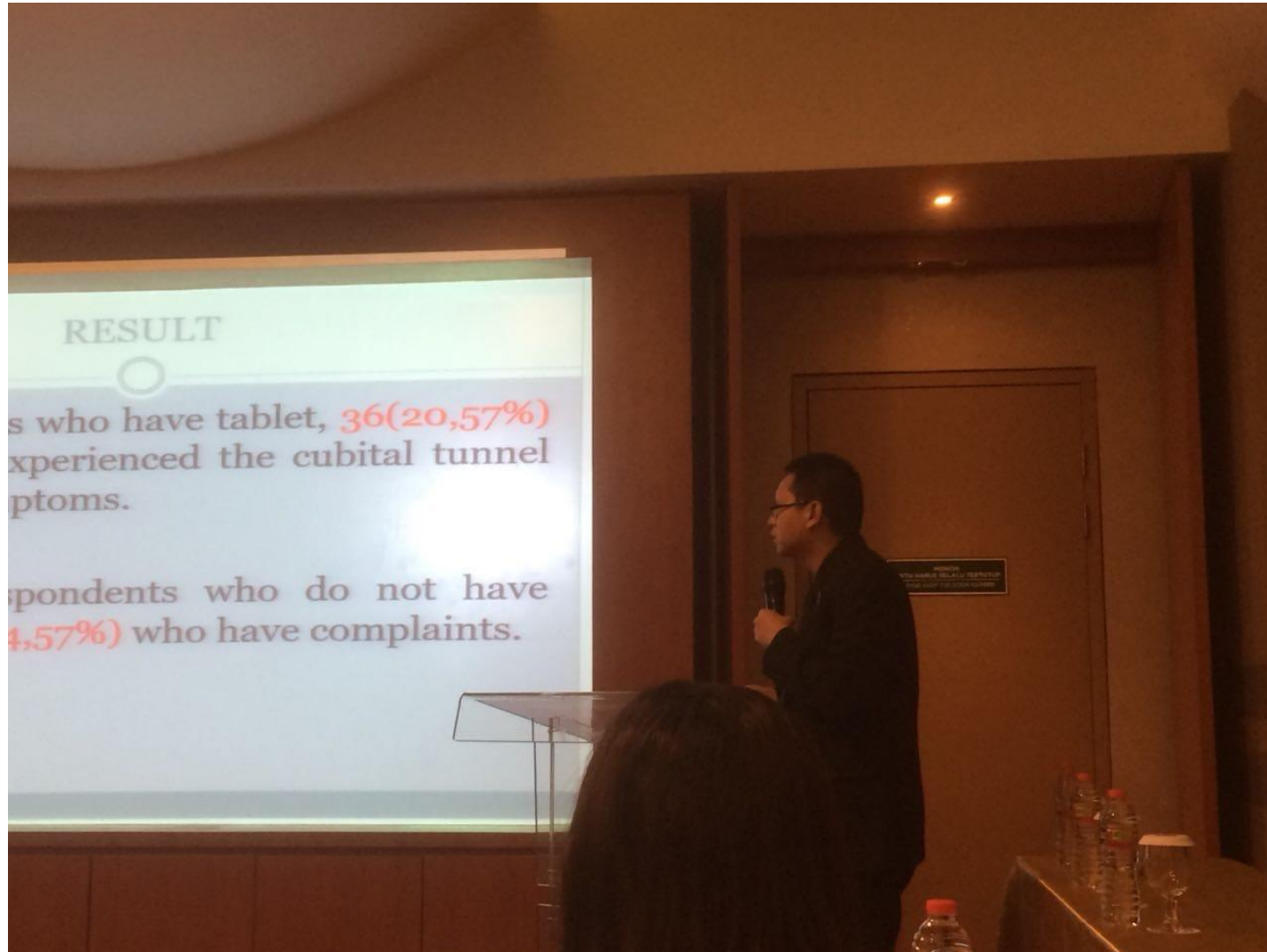
**Result:** There were 175 respondents; 80(46%) male and 90(54%) female. Respondents who own a tablet computer (tablets) as much as 99(56%) while 76(44%) of respondents don't have. In respondents who have tablet, 36(20.57%) respondents experienced the cellphone elbow symptoms. While the respondents who do not have tablets only 8(4.57%) who have complaints. From this study we know that respondents who have tablets are more at risk of having cellphone elbow symptoms compared with respondents who don't have ( $p:0.0001$ ). There was a significant difference of cellphone elbow incidence ( $p:0.005$ ) in respondents who using tablet  $> 5.25$  hours per day compare to the less one. Respondents who using a tablet with lying down position and flexion elbow  $> 1.4$  hours per day also had more at risk to suffer cellphone elbow symptoms ( $p:0.05$ ). There were no significant differences between gender ( $p:0.469$ ), screen size ( $p:0.563$ ), and weight ( $p:0.92$ ) on cellphone elbow complaints.

**Conclusion:** There is a relationship between ownership of tablet computers, length of use, and posture against the occurrence of cellphone elbow. There is no relationship between gender, screen size, and weight to the cellphone elbow incidence.



FOTO







# SERTIFIKAT



**THE INDONESIAN MEDICAL ASSOCIATION  
THE INDONESIAN ORTHOPAEDIC AND TRAUMATOLOGY ASSOCIATION**



*Certificate*

*Presented to*

*dr. Helmi Ismunandar*

**FOR FREE PAPER PRESENTATION CATEGORY BASIC SCIENCE**

*With presentation entitled*

*Comparison of Behavior in Tablet Computer Using on Cubital Tunnel Incident*

**66<sup>th</sup> Continuing Orthopaedic Education (COE)  
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**Theme :**

**"UPDATED MANAGEMENT ON PEDIATRIC ORTHOPAEDIC MUSCULOSKELETAL DISORDERS"**

**Golden Tulip Galaxy Hotel, Banjarmasin, May 9<sup>th</sup> - 12<sup>th</sup>, 2018**

**Chairman of Organizing Committee**

**Izaak Zoelkarnain Akbar, MD, PhD**

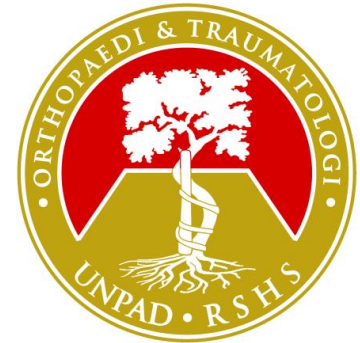
**Chairman of The Indonesian College  
of Orthopaedic & Traumatology**

**Ifran Saleh, MD**





# PRESENTASI



# **Comparison Of Behavior In Tablet Computer Using On Cubital Tunnel Syndrome Incident**

**ISMUNANDAR H, ARSA W, RAMDAN A**

**DEPARTMENT OF ORTHOPAEDICS AND TRAUMATOLOGY  
FACULTY OF MEDICINE UNIVERSITAS PADJADJARAN  
DR. HASAN SADIKIN GENERAL HOSPITAL**

# INTRODUCTION



- The **smart device utilization** continues to **increase** exponentially.
- People **spend more time** with their smart devices.

Dorowish M. What is Cellphone Elbow and What Should We Tell Ours Patients. Cleveland Clinic Journal of Medicine. 2009; 76(5): 306-8.

Zymney E. Cellphone Elbow Isn't Always due to Cell Phone Use [document on the internet]. New York: Everyday Health. 2009. [Downloaded 22 February 2018]. website: [www.everydayhealth.com](http://www.everydayhealth.com)

# INTRODUCTION



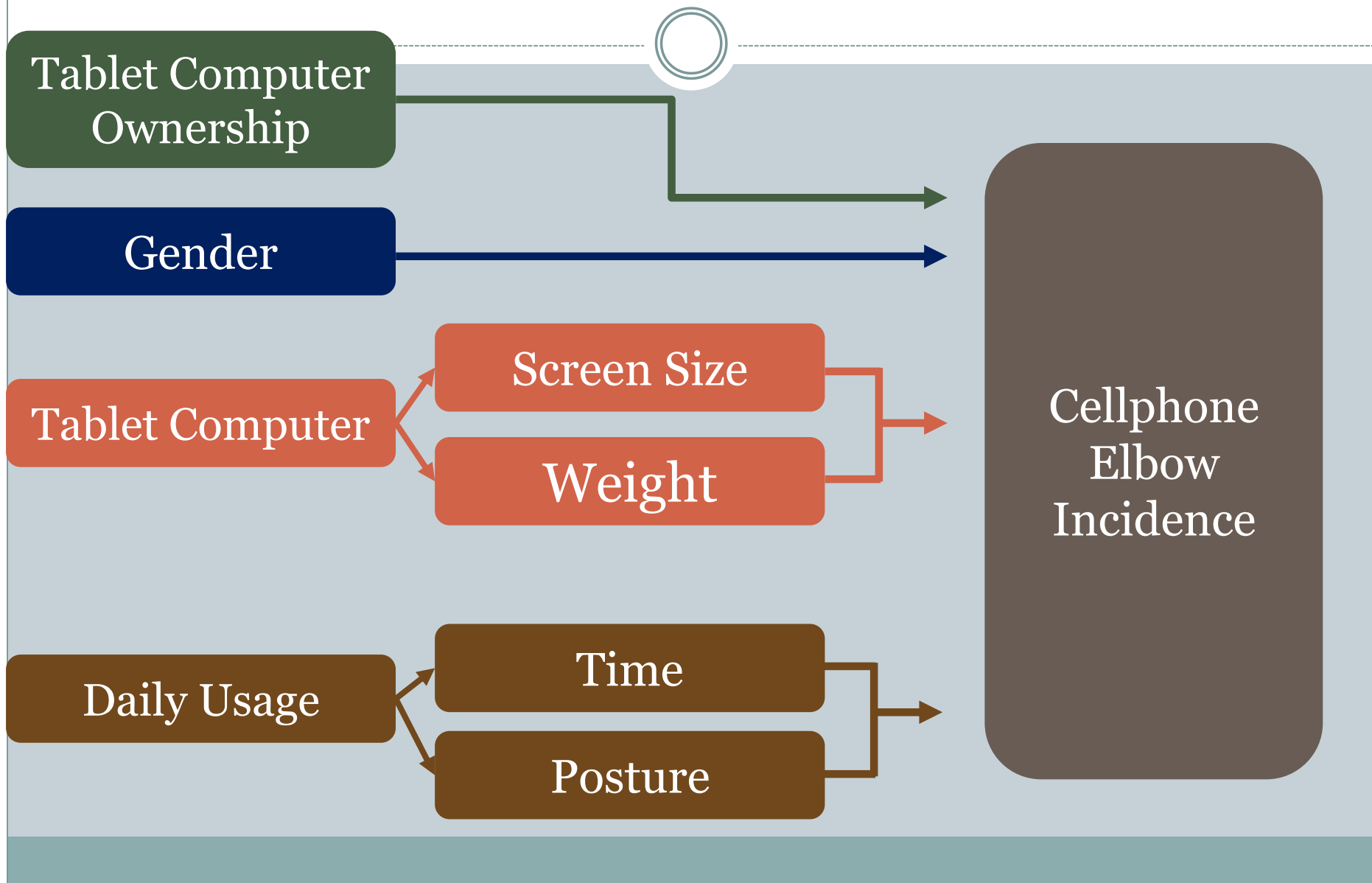
- Length of **usage time** and **bad posture** increase the risk of cellphone elbow (**cubital tunnel syndrome**) incident.
- But The **exactly incidence** of cellphone elbow is definitely **unknown**.

Dorowish M. What is Cellphone Elbow and What Should We Tell Ours Patients. Cleveland Clinic Journal of Medicine. 2009; 76(5): 306-8.

Ernst D. Cellphone Elbow [document on the internet]. USA: Orthopedic Associates of Port Huron. 2014. [Downloaded: 22 Februari 2018]. Website: [www.oaph.com](http://www.oaph.com)



# INTRODUCTION



# METHOD



- This is an **observational** study with **cross-sectional design**.
- Primary data were obtained by distributing the questionnaires.

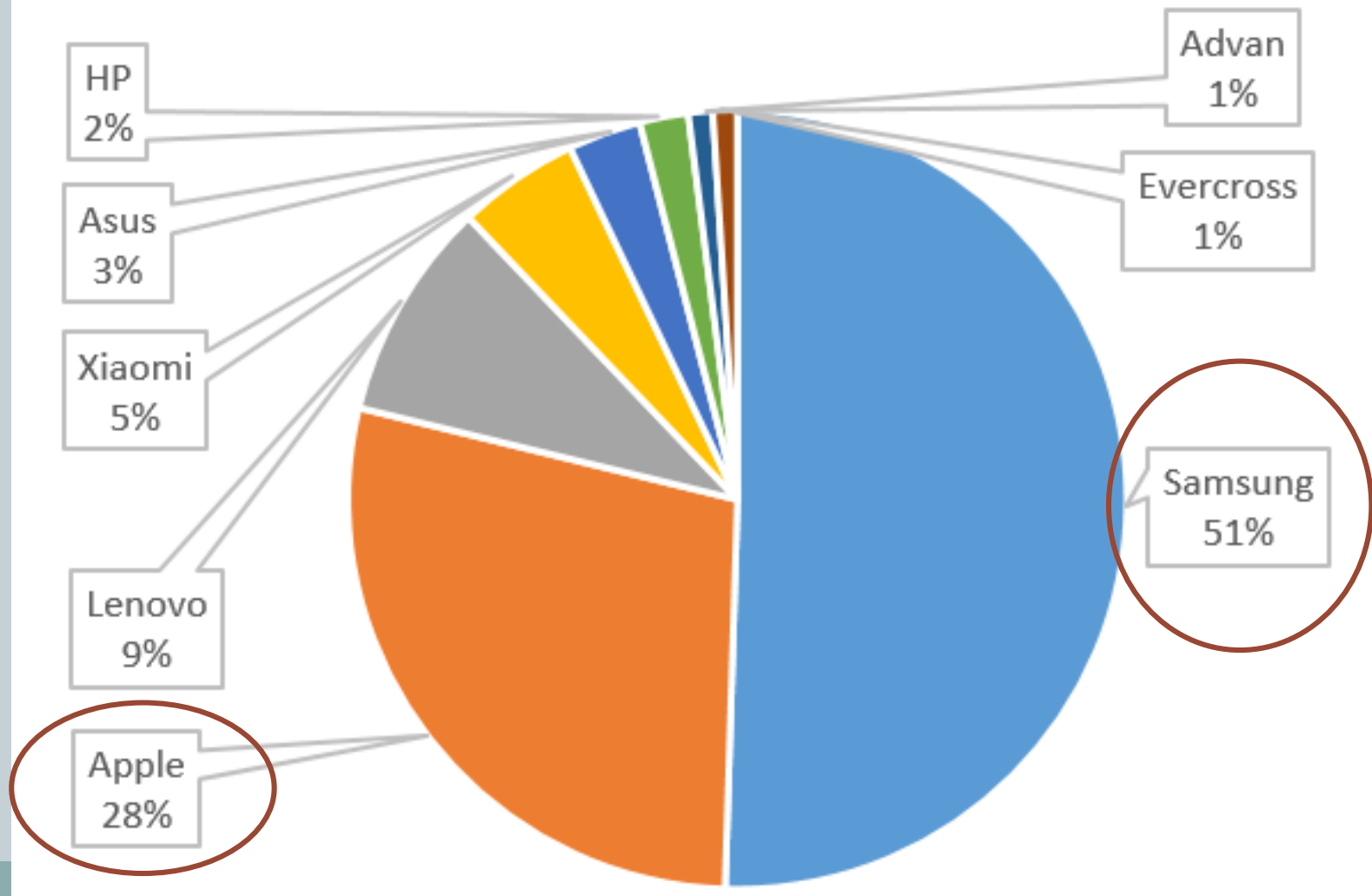
# RESULT



- There were 175 respondents
- 80(46%) are male and 90(54%) are female
- Respondents who own a tablet computer as much as 99(56%) while 76(44%) of respondents don't have

# RESULT

DIAGRAM 1 DISTRIBUTION OF TABLET COMPUTER MANUFACTURER





# RESULT



- Screen size average: 8"
- Tablet Computer weight average: 334 gram
- Daily usage average: 5,25 hours

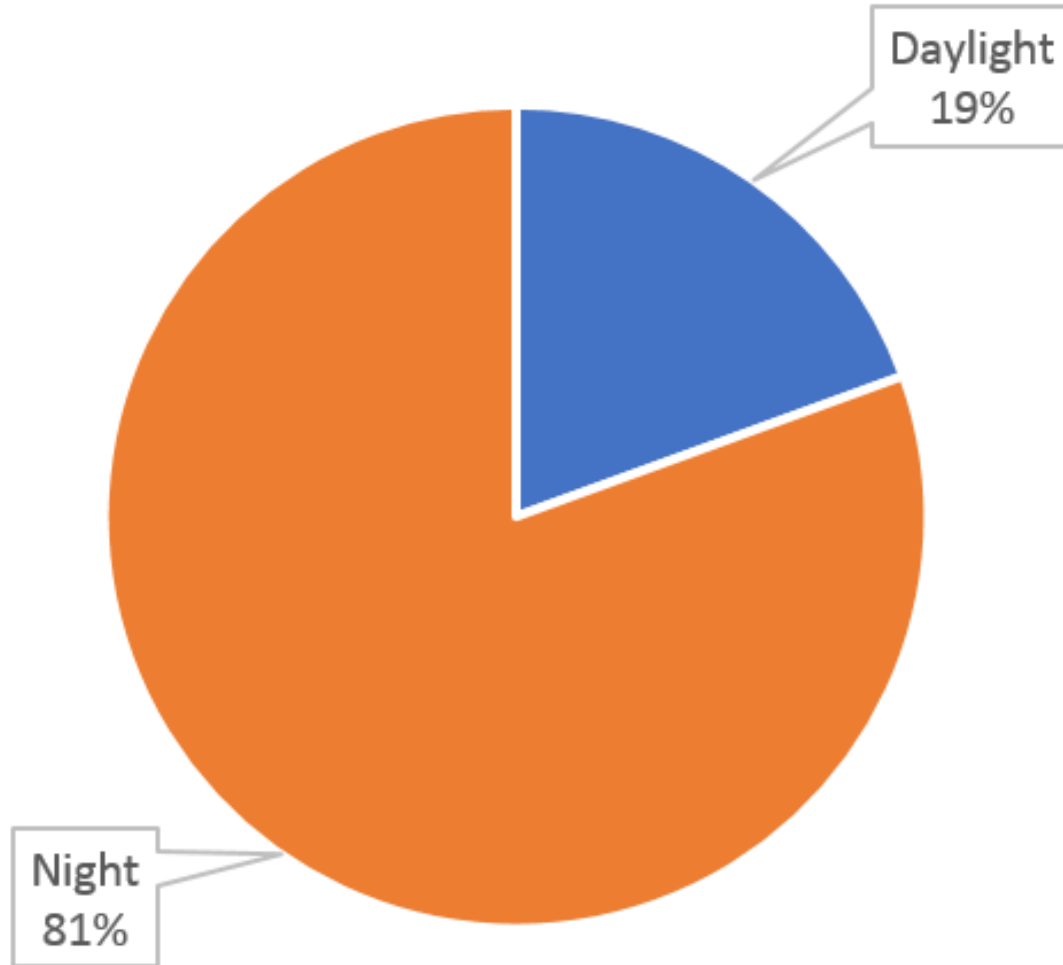
# RESULT



- In respondents who have tablet, 36(20,57%) respondents experienced the cubital tunnel syndrome symptoms.
- While the respondents who do not have tablets only 8(4,57%) who have complaints.

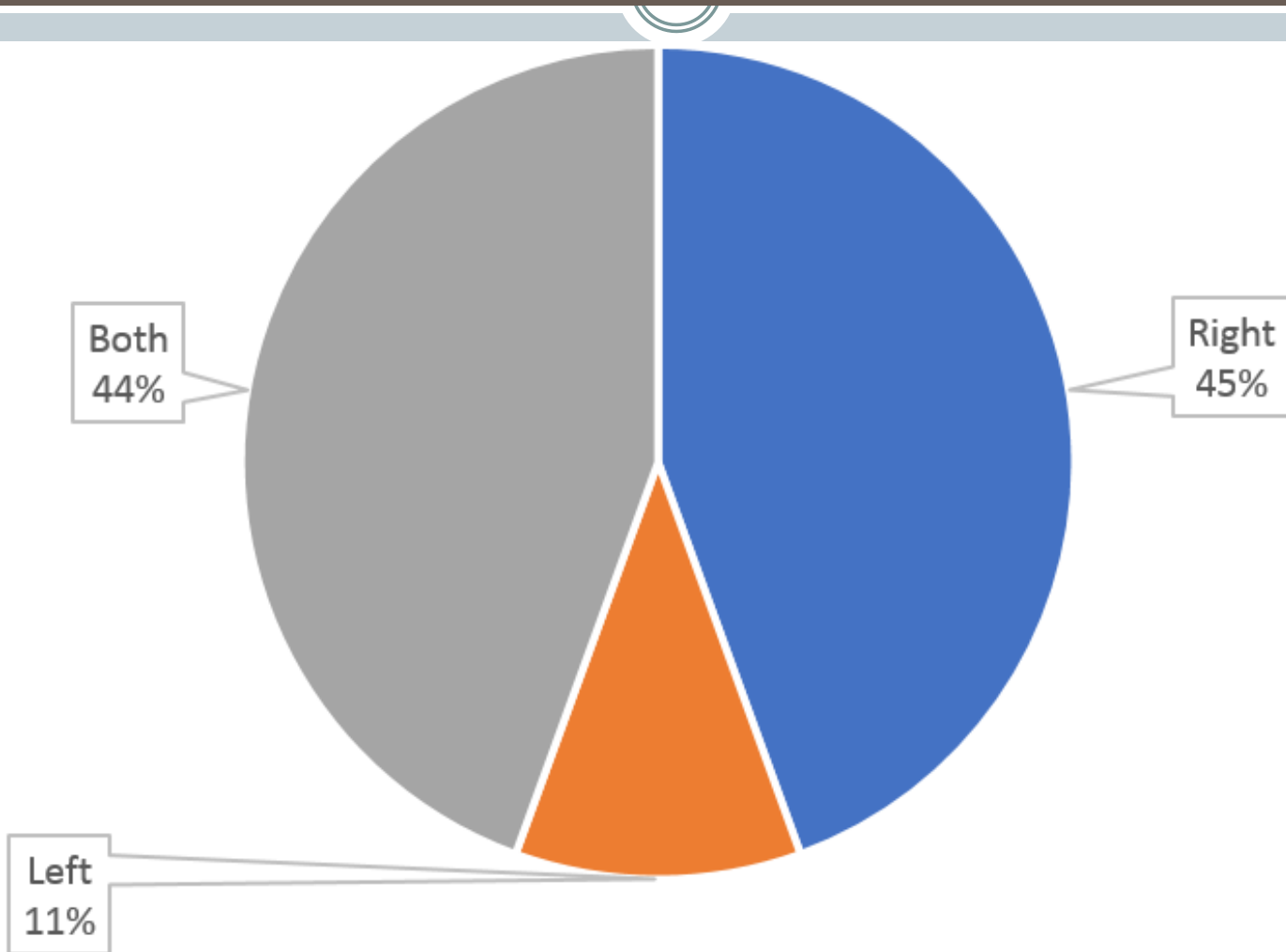
# RESULT

DIAGRAM 2 DISTRIBUTION OF CELLPHONE ELBOW INCIDENCE TIME



# RESULT

DIAGRAM 3 DISTRIBUTION OF UPPER LIMBS INVOLVEMENT





# RESULT



**TABLE 1 Ownership and Cellphone Elbow**

Ownership	Cellphone Elbow		<i>p</i>
	(+)	(-)	
Have	36	63	<b>0,0001</b>
Don't have	8	68	

# RESULT



**TABLE 2 Gender and Cellphone Elbow**

<b>Gender</b>	<b>Cellphone Elbow</b>		<i>p</i>
	<b>(+)</b>	<b>(-)</b>	
Male	15	31	0,469
Female	21	32	

# RESULT



**TABLE 3 Screen Size and Cellphone Elbow**

Screen Size	Cellphone Elbow		<i>p</i>
	(+)	(-)	
>8"	8	11	0,563
≤8"	28	52	

# RESULT



**TABLE 4 Weight and Cellphone Elbow**

<b>Weight</b>	<b>Cellphone Elbow</b>		<i>p</i>
	<b>(+)</b>	<b>(-)</b>	
>334 gram	6	11	0,92
≤334 gram	30	52	

# RESULT



**TABLE 5 Daily Usage and Cellphone Elbow**

<b>Daily Usage</b>	<b>Cellphone Elbow</b>		<i>p</i>
	<b>(+)</b>	<b>(-)</b>	
>5,25 hours	23	22	0,005
≤5,25 hours	13	41	

# RESULT



**TABLE 6 Posture and Cellphone Elbow**

<b>Posture</b>	<b>Cellphone Elbow</b>		<i>p</i>
	<b>(+)</b>	<b>(-)</b>	
>1,4 hours	29	16	<b>0,000</b>
≤1,4 hours	7	47	



# DISCUSSION



- The use of smart devices continues to increase exponentially.
- Some people spend more time with their smart than before.
- Based on a study by the Digital Analysis Firm in **2016**  
→ person **spends about 2 hours 57** minutes with his smart device a day.

Dorowish M. What is Cellphone Elbow and What Should We Tell Ours Patients. Cleveland Clinic Journal of Medicine. 2009; 76(5): 306-8.

Zymney E. Cellphone Elbow Isn't Always due to Cell Phone Use [document on the internet]. New York: Everyday Health. 2009. [Downloaded 22 February 2018]. website: [www.everydayhealth.com](http://www.everydayhealth.com)

# DISCUSSION



- Smart device makes **life easier** → But, there is an **increasing** number of people who have **complaints on fingers, hands, and elbows** due to the use of this smart device.
- The most common complaints are **pain** or **numbness** of the ring finger and little finger.

Ernst D. Cellphone Elbow [document on the internet]. USA: Orthopedic Associates of Port Huron. 2014. [Downloaded 22 Februari 2018]. Website: [www.oaph.com](http://www.oaph.com)

Powell R. Effects of Smartphones on Your Fingers, Hands, and Elbows [document on the internet]. USA: The Orthopaedic Institute. 2016. [Downloaded 22 Februari 2018]. Website: <http://www.toi-health.com>

# DISCUSSION



- This set of symptoms is referred cellphone elbow by **press**.
- In the **medical term** better known as cubital tunnel syndrome.

Ernst D. Cellphone Elbow [document on the internet]. USA: Orthopedic Associates of Port Huron. 2014. [Diunduh 22 Februari 2018]. Tersedia di: [www.oaph.com](http://www.oaph.com)

Harmon K. Is There Such a Thing as Cellphone Elbow [document on the internet]. USA: Scientific American. 2009. [Downloaded 22 Februari 2018]. Website: [www.scientificamerican.com](http://www.scientificamerican.com)

# DISCUSSION



- It is believed that the **ulna nerve** is **compressed** at the elbow as it passes through a **narrow gap**.
- **Flexed elbow** (especially if  $> 90^\circ$ ) for a long time can trigger irritation of the ulna nerve and cause the symptoms.

Ernst D. Cellphone Elbow [document on the internet]. USA: Orthopedic Associates of Port Huron. 2014. [Diunduh 22 Februari 2018]. Tersedia di: [www.oaph.com](http://www.oaph.com)

Harmon K. Is There Such a Thing as Cellphone Elbow [document on the internet]. USA: Scientific American. 2009. [Downloaded 22 Februari 2018]. Website: [www.scientificamerican.com](http://www.scientificamerican.com)

# DISCUSSION



- Tablet computers (tablets) is a portable computer.
- This device is thin, equipped with touch screen, and rechargeable battery.

# DISCUSSION



- This device resembles a smart phone, the only difference is that the tablets are larger than smart phone.
- The screen diagonal size is 7 inches (18 cm) or more.

# DISCUSSION



- From this study we know that respondents who **have tablet** are **more at risk** of having cellphone elbow symptoms compared with respondents who don't have (p:0,0001).
- There was a **significant difference** of cellphone elbow incidence (p:0,005) in respondents who **using tablet > 5.25 hours** per day compare to the less one.

# DISCUSSION



- Respondents who using a tablet with **lying down position and flexion elbow >1,4 hours** per day also had more at **risk** to suffer cellphone elbow symptoms ( $p < 0,05$ ).
- There were **no significant** differences between **gender** ( $p: 0,469$ ), **screen size** ( $p: 0,563$ ), and **weight** ( $p: 0,92$ ) on cellphone elbow complaints.



# CONCLUSION



- There is a different between ownership of tablet computers, length of use, and posture against the occurrence of cellphone elbow.
- There is no different between gender, screen size, and weight to the cellphone elbow incidence.



**THANK YOU**