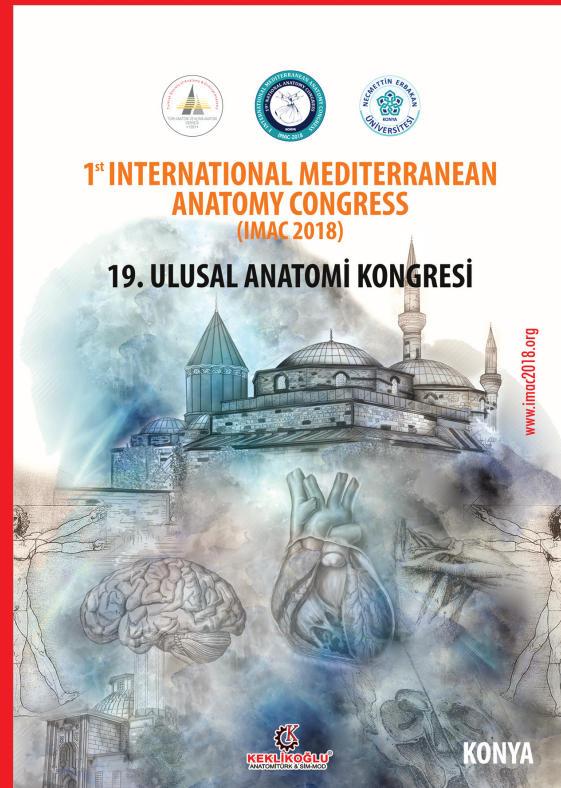


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55.6% (5 fractures) of proximal pole fractures, 15.4% (2 fractures) of scaphoid waist fractures and 7.7% (2 fractures) of distal fractures were not detected and treated surgically. Proximal pole fractures required surgical intervention in a statistically significant manner ($p < 0.01$) in comparison with both scaphoid waist and distal tip fractures. Gender, age and fracture dominant or nondominant were not significantly associated with the need for surgical intervention ($p > 0.05$).

Conclusion: In this study, it was thought that it would be useful to evaluate the anatomic location of the fracture in relation to the blood flow in scaphoid bone fractures, and to evaluate the proximal fractures in detail from the surgical point of view.

Keywords: scaphoid bone, fracture, anatomy, orthopedics, traumatology

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Talus morphometry and morphological features

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Objective: Talus is the highest of the tarsal bones of the foot and is the keybone of the foot arch. Talus supports body weight transmitted via tibia and distributes it to other tarsal bones. For this reason, it is thought that it may be effective in many deformities encountered in the foot. In this study, morphometric dimensions, angular features and facies articular calcanea types of talus were investigated. To identify the anatomical variations that can be seen in the talus, to identify the types of joint faces and the orientation differences between them, to define the morphometric features of the talus.

Methods: The study was carried out on 50 dry talus (30 right and 20 left) of unknown sex in anatomy laboratories of Selçuk University and KTO Karatay University Faculty of Medicine. In the morphometric measurements, total talus length, width and height, height of caput tali, length of collum tali, length and width of trochlea tali, the length and width of the art. subtalaris were measured using digital calipers. In addition, vertical and medial neck angles were measured and facies articular calcanea types were determined

Results: The mean talus length in the examined dry materials was found to be 55.47 (47.53–65.30) mm; width 41.56 (34.49–48.96) mm; height 31.70 (25.34–38.63) mm. The mean vertical neck angle was calculated as 95.08° (88°–103°), medial neck angle was found as 73.24° (64°–84°). According to Nozaki et al. (2016) classification of subtalar joint faces, 7 types (14%) of B1 type, 13 (26%) type B2, 18 (36%) type C, 3 Type D, E1 type in 6 (12%) and E2 type in 2 (4%). It was found that only 1 subject (2%) was type A.

Conclusion: The results of the study may be a reference foot treatment of talar injuries in clinical practice, such as the design

of total ankle replacement components and surgical reconstruction of talar articular structures.

Keywords: talus, morphology, morphometry

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Agensis of the superior corns of the thyroid cartilage: two autopsy case reports

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Objective: Thyroid cartilage is the largest cartilage of larynx and it consists of two bilateral lamina with hyaline cartilage, which merges at the “V” in the midline. The posterior edges of the laminae extend upward with the superior corn. It is longer and narrower. The lateral thyrohyoid ligament is extending to the apex of the superior corn. The agensis of superior corn is one of the anatomic variations of the thyroid cartilage.

Methods: In this study, two cases of superior corn of thyroid cartilage agensis are presented which were determined in 1920 forensic autopsies performed in Konya.

Results: Case 1: Right superior corn agensis was determined in an autopsy conducted that 42-year old man died due to cerebral hemorrhage. Case 2: Left superior corn agensis was determined in an autopsy conducted that 26-year old man died due to poisoning. No additional larynx variation was detected.

Conclusion: In the literature, the agensis of superior corn has been reported very rarely. In a series of cadaver studies agensis of superior corn was found to be 0.9% and 1.3%, respectively. Most of the unilateral agensis cases were on the left side in the literature. In this study, the agensis of superior corn was noticed on the left in one case and on the right in the other case. This variation can be mistakenly considered broken cartilage by radiologists and forensic medicine experts. This can lead to confusion about the cause of death. It is very important especially for forensic medicine experts to know the variations of thyroid cartilage and hyoid bone at autopsy.

Keywords: autopsy, larynx, superior corn, variation

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Morphometric measurements of the calcaneus bone and types of talar articular facets

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