Foreword

At the time of allotment of topic for thesis, initially I had one goal in mind; to work on a subject which had operative management as the mainstay of treatment. I discussed various tentative subject with my guide who felt that the supracondylar fracture of the humerus in children with its various modes of treatment, each promising to be better than the others would be a very interesting one to work on.

When my guide suggested the present subject as a topic for thesis, I was rather disappointed as most others would be at my age. For one topic was conservative, non surgical. Moreover it was difficult to believe that a change in position of the forearm from supine (which is the position described in text) to prone would make much difference. Going through the literature made me realize that the topic was intriguing and challenging. However, it still could not change my perception that the results of open reduction and internal fixation would give the best results as any fault in reduction would not be possible and the internal fixation would prevent any possibility of redisplacement and thus no deformity would occur. As study progressed even this perception eroded.

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