

PATIENT INFORMATION

WRIST FRACTURE



This leaflet will provide you with the information required to begin your rehabilitation following your wrist fracture.

Whilst your wrist has been immobilised in the cast or splint, the muscles and soft tissue will have become weaker and stiffer. It is important to begin to exercise and strengthen your wrist in order to return to your previous level of function.

Pain

Pain is very normal following your fracture and it is important to manage this so you can complete your exercises and be comfortable managing daily tasks. A lot of the pain you will experience is likely due to joint stiffness from the muscle and ligaments of the wrist, and not the site of the fracture.

Ensure you are taking the pain medication as prescribed by your Consultant. This will allow you to be more comfortable, making it easier to complete your physiotherapy exercises, which will help restore your range and strength and return to your previous level of function.

Swelling

You may notice swelling in your arm, wrist or hand. Try using an ice pack on the wrist for 10-15 minutes maximum. You can use a packet of frozen peas or a gel pack. Ensure it is wrapped in a damp tea towel in order to protect your skin. Check regularly throughout application that you are not getting severe blanching of the skin.

Massage can also help with swelling, as well as pain and sensitivity. Use a non-perfumed moisturiser or oil and massage the skin, starting at your hand and pushing up towards your elbow.

Skin

It is normal to experience dry and sensitive skin following removal of the cast. Wash the area with a non-perfumed soap and use moisturiser such as E45 cream or a neutral oil to help moisturise the skin.

Splint

You may be provided with a splint to wear to support you whilst completing some heavier tasks. It is advisable to keep the use of it to a minimum and gradually wean off using it, in order to regain normal function and strength, unless advised otherwise by your specialist.

Activity Advice

You should begin to try and use your affected wrist for light tasks, aiming to get used to using your hand again and regain range of movement, strength and dexterity. Avoid any heavy lifting or carrying initially, such as using the kettle or pushing a heavy door.

Some manageable activities are listed below.

- Using your phone.
- Completing personal care e.g. washing, make up or combing hair.
- Dressing e.g. light clothes, zips and easy buttons.
- Writing e.g. signing your name or doing a crossword puzzle.
- Washing up and wiping tables

There is a separate leaflet called 'Hand Grip Advice' available on our website for further information and examples.


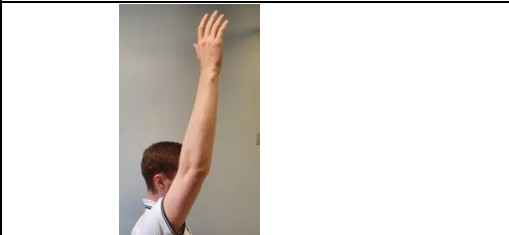
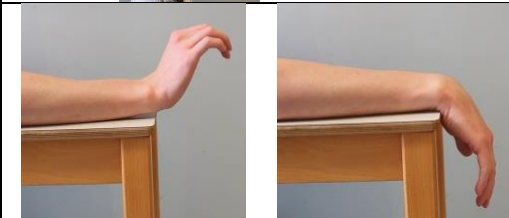
Exercises


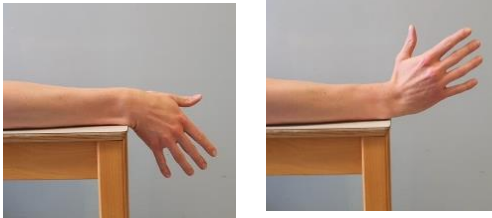
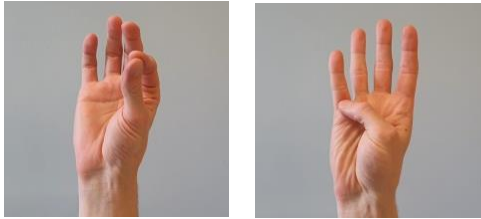


The following exercises are split in to early stage and late stage. You should begin the early stage exercises straight away. These are aimed to increase the range of movement and improve the control in the muscle of the wrist and hand.

They then progress to further stretching exercises and strengthening exercises. When completing the stretching exercises you should be working to the end of your range where it feels uncomfortable, in order to make an improvement in the range. For the strengthening exercises begin with a light weight e.g. 0.5kg dumbbell, a tin of beans or small bottle of water.

Your physiotherapist will highlight which exercises you should be completing and they will fill in below how often you should be completing them for.

Early Exercises

<input type="checkbox"/> Elbow bend and straighten Bend your elbow so your hand is near your shoulder. Straighten your arm fully.	
<input type="checkbox"/> Reaching to ceiling Reach up to the ceiling as high as able. Lower down.	
<input type="checkbox"/> Flexion and extension Have forearm supported on a table or arm of chair. Palm facing towards floor, over the edge of the surface. Lift up wrist towards you as far as able. Add assistant from other hand if needed. Slowly lower down and let wrist bend as far down as able.	

<input type="checkbox"/> Pronation and supination Have forearm supported on table with elbow at 90 degrees tucked in to your side. Begin with palm facing down, then turn over so palm is facing up. Avoid movement from your shoulder, trunk or elbow.	
<input type="checkbox"/> Radial deviation and ulnar deviation Have forearm supported on a table or arm of chair. Have little finger facing down with wrist over the edge of the table. Lower wrist towards floor, then lift up towards you.	
<input type="checkbox"/> Thumb to finger Bring your thumb to meet your index finger as if making the 'OK' sign. Then move along to your 3 rd , 4 th , then 5 th finger. If able, reach for the creases of your 5 th finger, working down to the line where your finger meets your knuckle.	
<input type="checkbox"/> Open and close Make a fist, bringing fingertips to the palm of your hand. Then straighten your fingers as far as able, fanning them apart.	
<input type="checkbox"/> Prayer Stretch Put both hands together and aim to keep palms touching throughout this whole stretch. Slowly bring hands down your chest, lifting elbows up and out to the side. Hold until you feel slight discomfort. Hold for 10 seconds, then relax.	

How Often To Complete the Exercises

Late Exercises



Extension table

In sitting, place your hand flat on a table. Lift elbow up so you feel a bend in your wrist. Hold for 10 seconds.



Flexion with overpressure

Have forearm supported on a table. Palm facing towards floor, over the edge of the surface. Allow wrist to drop down then use your other hand to apply a stretch. Hold for 10 seconds.



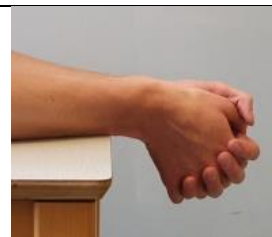
Assisted supination

Clasp hands together, have elbows at 90 degrees tucked in to your side. Use your other hand to roll over your affected hand so the back of the hand is flat on the surface. Then roll back the other way.



Assisted radial and ulnar deviation

Have forearm supported on a table or arm of chair. Clasp hands together and have little finger facing down with wrist over the edge of the table. Lower wrist towards floor, then lift up towards you, using your other side to help.



Towel wringing

Roll up a small towel and grip with both hands. Wring out the towel, first moving hand forward and then backwards, like you are revving a motor bike.



Weighted extension

Have forearm supported on a table with wrist over the edge and palm facing down. Hold weight. Lift weight up, bending at the wrist only. Slowly lower down.



<input type="checkbox"/> Weighted flexion Have forearm supported on a table with wrist over the edge and palm facing up. Hold weight. Lift weight up, bending at the wrist only. Slowly lower down.	
<input type="checkbox"/> Weighted radial deviation Have forearm supported on a table with wrist over the edge and thumb facing up. Hold weight. Lift weight up, bending at the wrist only. Slowly lower down.	
<input type="checkbox"/> Weighted supination and pronation Have forearm supported on a table with wrist over the edge and palm facing down. Hold weight. Slowly rotate wrist over so palm is facing up.	
<input type="checkbox"/> Weighted ulnar deviation Hold a weight and have arm down by your side and hand facing in. Bend wrist so border of little finger is moving back.	

How Often To Complete the Exercises

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.