



ENVISAGE
PHYSIOTHERAPY

Wrist Fracture

What is it and what can I do?



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What is a wrist fracture

A wrist fracture is a break involving the bones around the wrist joint. It more commonly affects the radius (*near to the thumb*) but can affect the ulnar (*near to the little finger*). Both are the primary, long bones within the forearm. Each of these bones connect to and form part of the wrist joint along with the smaller bones in the hand. Wrist fractures are relatively common and can occur due to variety of causes, including falls, sports injuries, or accidents.

Usually an X-Ray will be required to gain more clarity and determine the extent of the fracture so it can be treated accordingly.



Signs & Symptoms

- Pain over the area of the break.
- Swelling and maybe bruising to the area involved.
- Limited ability to use the hand arm / you may feel you want to cradle it.



WHO is at risk

Anyone can suffer a wrist fracture but it tends to be more common in specific age groups and demographics of people with underlying health conditions. They are also common in those completing in sporting activities. Generally a fracture is as a result of a fall onto outstretched hand (FOOSH).



Elderly individuals: The natural aging process can make bones become more brittle and prone to fractures.

Osteoporosis: Osteoporosis can weaken bones, making them more susceptible to fractures.

Postmenopausal women: Women who have gone through menopause, can be at a higher risk of osteoporosis due to hormonal changes. This affects bone density and increase their susceptibility to wrist fractures.



WHO is at risk.....cont

Certain medications: Long-term use of corticosteroids, has been shown to weaken bones and therefore predispose to an increase risk of fractures.

Previous fractures: Those individuals who have previously experienced a wrist fracture or fractures in other parts of the body may be more prone to future fractures.



Activities with a risk of falling: Engaging in certain sports (eg: skateboarding, snowboarding, or gymnastics) or occupational activities that carry a high risk of falling can increase the likelihood of wrist fractures.

Poor balance and coordination: People with poor balance or coordination may be more prone to falls therefore increasing the risk of wrist fractures.



Treatment options

Common options include

- **Immobilisation:** Usually via a cast or splint this helps keep the bones in the correct position in order for satisfactory healing.
- **Closed reduction:** A doctor may perform a closed reduction, where a manipulation is performed to realign the broken bones back without surgery. This is often followed by applying a cast or splint for immobilisation.

Surgery

- **Open reduction and internal fixation (ORIF):** Usually if more severe surgery may be necessary. This procedure involves repositioning the broken bones and uses screws and plates to hold them in place.
- **External fixation:** If the break is complex an external fixation device may be used which involves placing pins/ screws into the bones on either side of the fracture, connected to an external frame to stabilise the bones to heal correctly.

Alternatives - post healing

- **Physiotherapy:** Physio offers rehabilitation to regain movement and strength back in the wrist. It is always a wise move to prevent further episodes of falls using a programme of exercises to improve balance and confidence.
- **Pain management:** Medication may be prescribed to reduce pain and swelling and provide comfort during healing.



Prognosis

The prognosis following a wrist fracture largely depends on the type and severity of the fracture, the age and overall health of the individual as well as the promptness and effectiveness of treatment, alongside the individual's commitment to the guidance given and rehabilitation. More routine cases generally heal well and the person can be back to relative normal after around 6-8 weeks although mild symptoms may still be apparent for up to 6 months. People who have more reliance upon their hand and wrist may benefit from rehabilitation via physiotherapy to regain optimum movement and strength. Meanwhile, more complex and severe cases can take longer to heal and return to normal. These cases would greatly benefit from physiotherapy intervention.

Any Serious Considerations

Most people with a fractured wrist recover well but it's worth noting that some cases can become more complex if correct diagnosis and treatment is delayed. If a fracture is suspected and you experience the following symptoms it is highly advised to seek attention and refer for an X-Ray.

- Pins & Needles, numbness or swelling into the hand.
- Change of colour in wrist and hand
- Swelling & pain over the base of the thumb
- Difficulty in using the thumb



When to seek professional opinion

It is strongly encouraged to seek professional opinion if

- **You are worried**
- **If you suspect a fracture and you need more clarity**
- **Progressively worsening symptoms**
- **If you start to experience P&N and/ or numbness in hand/ wrist**
- **Difficulty in using the hand for functional tasks**
- **Prolonged pain in the wrist**
- **You have immediate or latent swelling in the wrist/ hand**
- **Pain keeps you awake at night**
- **You have had a fall, direct trauma or injury, just prior to the symptoms**
- **The symptoms have lasted longer than 4-6 weeks**

Further investigation is usually via X-Ray but a scan may well be indicated dependent on your symptoms.

Need Assistance!!

Contact Envisage Physiotherapy to get a fast and clearer diagnosis or help to rehabilitate following a wrist fracture.

We are on hand to help.

Tel: 07980 821762



References



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