

Patient Name: _____

Broken Wrist
(aka Colles Fracture, Fractured Distal Radius)

The forearm is made up of two long bones called the radius and ulna. The radius forms the major bony support for the wrist joint. A very common injury to the wrist occurs when a person falls onto their outstretched hand. The radius commonly breaks when such a force is sustained. This injury is known as a Colles Fracture, or fractured distal radius. When a bone breaks, it can break into two clean pieces, or it can break into many more pieces (comminuted fracture). The broken fragments can remain in good position, or it can break and move into a bad position (displaced). The break can also extend into the joint (intra-articular fracture). With high energy injuries, the skin can also be breached (open or compound). All these factors are associated with a more severe injury. There are many options for managing a broken wrist, ranging from a simple plaster for 6 weeks to an operation to put plates and screws in. The appropriate operation depends on many factors including those listed above as well as the functional demands of the patient.

Regardless of the specific treatment chosen, there are some guidelines that all patients should follow in order to optimize their chance of a positive outcome:

1. Keep the injured arm elevated

The natural tendency after a limb is injured and/or operated on is for swelling to occur. Swelling causes pain and slows healing. It is very important to limit the amount of swelling by keeping the wrist elevated at all times. This can be achieved by wearing a sling when walking around, and by resting the wrist on a pillow when sleeping.

2. Call for help if there's a problem

If you have increasing pain, or if you are getting pins and needles or numbness in your fingers, you should be reviewed by the orthopaedic team semi-urgently. This can be achieved by you representing to the emergency department, or by contacting the team on the numbers listed below.

3. Keep the injured arm moving

Some patients have a tendency to stop moving the injured arm entirely when it is in a sling or plaster. This can result in stiffness in the surrounding joints. For that reason, it is important to keep these joints moving during that time.

4. Do not use the arm for daily activities

During the first 6 weeks, while the bone is healing it is important that no forces are placed through the wrist which may move the bone out of place. Therefore the injured wrist and hand SHOULD NOT be used for opening doors, carrying things, etc.

5. Look after your plaster

The plaster is an important part of your treatment. You need to care for your plaster by not allowing it to come loose or get soiled. In particular, you must not allow it to get wet, because the

skin and any wounds under the plaster will become very damaged if this occurs. When showering, put a garbage bag over the arm and tape it down around the arm above the plaster to avoid water seeping into the plaster. You SHOULD NOT swim with a plaster.

6. Attend your follow-up appointments

Regardless of the specific treatment chosen for your broken wrist, all patients should attend to see the orthopaedic team (either in clinic or in private rooms) within 1 to 2 weeks after the initial fracture. This allows the doctors to check the patient's progress, and possibly view an xray, remove stitches or tighten a plaster.

Who should I contact if I think I have a problem?

You should contact Dr Trantalís either through his office on the numbers listed below or after hours through his orthopaedic registrar at Concord Hospital on 9767 5000.

The plaster will usually be removed after 6 weeks. Initially the wrist will feel quite stiff and sore but the patient will then begin range of motion exercises to get back motion and strength in the wrist. The wrist will continue to improve for up to 6 months after the injury.

Exercises For Patients with a Broken Wrist (Managed either with or without Surgery)

All exercises to be done 4 times per day.

Perform each movement 10 times during each session.

Hold each stretch for a count of 10 seconds.

Each time you perform your exercises try to increase the range of motion within the limits stated.

A. Finger Exercises- Begin these exercises now

Get all the joints, especially the knuckle moving and bending as much as possible.

B. Shoulder Exercises- Begin these exercises now

- **Pendular Exercises:**

- Bend at the waist.
- Let the broken arm hang down with the force of gravity.
- Move the arm in gentle circles as though you were stirring a pot.

- **Assisted Forward Elevation:**

- Raise your arm forward above your head as far as possible. You may use the other arm to help get your arm up.



B. Elbow Exercises- Begin these exercises now.

- **Elbow Flexion / Extension:**

- Bend and straighten your elbow. You should use the muscles of the injured arm but you can use the other arm to help.

- **Elbow Supination / Pronation:**

- With your elbow at your side and bent at a right angle, turn the palm up and then palm down as much as you can. You can use the other hand to help.