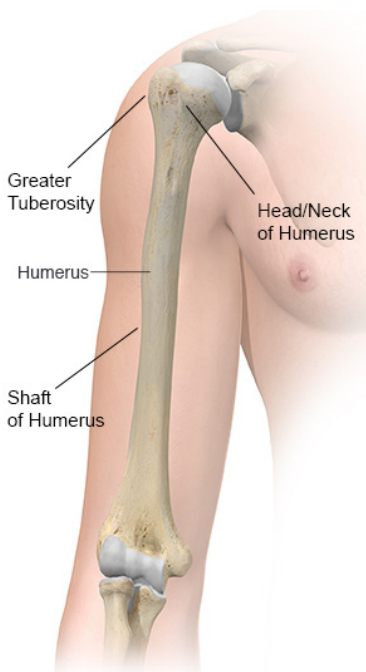




Virtual Fracture Clinic

Patient information

Humerus Fracture



Specialist Support

This leaflet can be made available in another language, large print or another format. Please speak to the Virtual Fracture Clinic who can advise you





This information leaflet follows up your recent conversation with the Fracture Clinic, where your case was reviewed by an orthopaedic Consultant (Bone specialist).

You have sustained a fracture (break) to your Humerus (upper arm bone). The Virtual Fracture Clinic letter will detail where the fracture is. This is a very painful injury due to muscle spasms and the bone ends moving. Regular painkillers will be required during your healing stage to aid recovery.

The treatment centre you attended will have provided you with a type of sling called a “collar and cuff”. This is the correct type of sling initially for this type of injury. This should be worn at all times.

If you are worried that you are unable to follow this rehabilitation plan, or have any questions, then please contact us by using the contact numbers on the front of this leaflet.

Healing: It takes approximately 12 weeks to heal. To fully resolve can take up to 1 year.

Pain and swelling: This can be a painful injury. You are likely to experience significant swelling & bruising that can track down your chest, arm and into your hand. Take regular painkillers and ensure regular movement of fingers wrist and elbow. You may find it easier to sleep in an upright position.
Do not place pillows under your elbow for support as this will encourage bone movement. Let the elbow hang free when sitting in your “collar and cuff” sling.





Stop non-steroidal anti-inflammatory drugs (NSAIDS) e.g. Ibuprofen, after 5-7 days as this will slow bone healing.

Hygiene: It is advised that body wipes can be used for under arm. To do this tilt your upper body forward which will allow your arm to move naturally away from your body. This will enable space to clean underarm.

Using your arm: You can use your arm as pain allows. Exercises are enclosed in the leaflets to help with your rehabilitation.

Follow up: Depending on the fracture you have, a follow-up may not be required. You will be advised by the Virtual Fracture Clinic if you need a follow-up, and when it will be. If we see you, we will re-assess the sling and may convert you to a brace. If you are not due to be followed up, and have problems with your sling, please call us using the numbers within this leaflet.

If you have any problems with the brace, such as:

- Pinching of the skin or swelling (brace too tight).
- Brace slipping or too much movement (brace too loose)
- Skin irritation or rash.

You can contact the plaster-room who will see you on the same day. Contact numbers are on the back of this leaflet.





Weeks since injury	Plan
0 - 1	<ul style="list-style-type: none">✓ Take regular analgesia, including NSAIDS.✓ Sleeping in an upright position will be more comfortable✓ Significant bruising and swelling are to be expected✓ Start the Initial Exercises
1-3	<ul style="list-style-type: none">✓ Stop NSAIDS and wean off analgesia as pain settles.✓ To start "initial rehabilitation" exercises detailed below.✓ You will be seen by an orthopaedic consultant (bone specialist) who will review your sling and may convert you to a brace
3-6	<ul style="list-style-type: none">✓ You can start the "additional exercises". These should be done without forcing movement.✓ Increase the exercises as pain settles. It can take up to 6 weeks for pain to settle.
6-12	<ul style="list-style-type: none">✓ You will see the orthopaedic consultant again. They will advise you on how the bone is healing and when you can come out of the brace/sling.✗ If you are still experiencing significant pain and swelling then please contact the Fracture Clinic.
Up to 1 year	<ul style="list-style-type: none">✓ The function and movement will continue to improve for up to 1 year.



Collar and Cuffs Sling



Allow the weight of your arm
help the bones re-align.

The purpose of the Collar and Cuff sling is to allow the weight of you arm to help the fracture re-align. Your hand should be higher than your elbow, and your elbow should not be supported. We will review the type of sling you have when we see you at your appointment. If you have problems with this sling, or are concerned regarding how it is fitting, please call the Virtual Fracture Clinic on the numbers within this information sheet.

Exercises

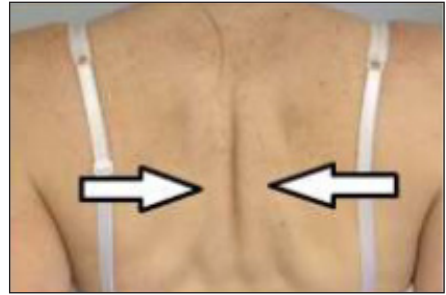
It is important to do these exercises several times a day - when waiting for the kettle to boil or during TV ads are good times to jog your memory. The more regularly you do these exercises the less likely you will develop hand, wrist and elbow stiffness.

Little and often (a few of each movement every hour) is better than doing lots of repetitions. These exercises are designed to prevent loss of movement, stiffness and muscle weakness.

Initial Exercises



Starting with straight fingers, flex them doing into a loose fist. As the swelling reduces your range of movement will increase. Work your way through the movements as shown in the picture above, ending with straight fingers again. This will help with blood circulation to your hand and will prevent your fingers getting stiff.



These exercises can be done sitting or standing. The Collar & Cuff may be removed if easier. Bring shoulders back in a squeezing of shoulder blades motion. Hold this position for 30-60 seconds and repeat 5 times providing there is no increase in pain.

Initial Face-to-Face review

You will be seen in fracture clinic a few weeks after your injury. This is to assess how the fracture is aligning and discuss ongoing management for this injury. The majority of cases are managed non-operatively. Depending on the type of fracture you have, you may require a Humeral Brace. The Humeral Brace can remain in place for 6-12 weeks depending on nature of the fracture and the healing process. It is important therefore that the brace remains in place for the whole duration of your treatment. Removal of the brace should be by a registered practitioner only.





Additional Exercises

These can be started after your face-to-face review in the fracture clinic. You can take the sling off to perform these. If a humeral brace has been fitted, this should not be removed. As with the initial exercise, little and often is better than doing lots of repetitions.



Bend and straighten your elbow as far as possible without pain until moderate stretch only. Other hand may be used to assist this movement. Repeat exercise 10 -15 times.

With elbow at side of body and bent to 90. Slowly rotate your palm up and then down as far as you can go without pain. Repeat exercise 10-15 times.





Additional Exercises

These can be started 2 weeks after the brace has been fitted. As with the initial exercise, little and often is better than doing lots of repetitions.

Ball Grip (Wrist up)



Ball Grip (Wrist down)



Pinch



Extend out



Side-squeeze



The following pictures above show different ball grip exercises.

- Start with 5 squeezes for each exercise, holding for a couple of seconds.
- Rest for 2 minutes before completing a further set.
- Increase the amount of repetitions for each exercise as able.





Stand lean forward supporting your injured hand as shown in picture. Try to relax whilst carrying exercise.

1. Assist your arm slowly and gently forward and backwards.
2. Assist your arm slowly and gently from side to side.
3. Make small, circular movement with your hand.

Continue for approximately for **1-2** minutes provided there is no increase in pain.

Smoking cessation

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether.

It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery from this injury.

For advice on smoking cessation and local support available, please refer to the following website:

<http://smokefree.nhs.uk> or discuss this with your GP.





Contact Day hours

Fracture Clinic (Monday – Friday, 8am – 5pm) Tel: **023 9228 6195**

Plaster-Room (Monday – Friday, 8:30am – 4:00pm)
Tel: **023 9228 6512**

Helpline (non urgent) 023 9228 3385 – leave a message and we will call you back.

Fracture Clinic nurse-in-charge (Monday – Friday, 8am – 5pm)
023 9228 6000 BLEEP 1379.

Outside these times, **urgent queries only**, Emergency Department
023 9228 6561.

Sources of information

This information has been developed by the Fracture Clinic Team, Portsmouth.

Comments

We are always interested to hear your views about your experience of Virtual Fracture Clinic and the information provided. If you have any comments, please contact us by phone (see below for contact numbers) or via email at: VFC.feedback@porthosp.nhs.uk





Data Protection Legislation – Privacy Notice

Further information on how we look after your personal information can be found on the Trust Information Governance webpage at www.porthosp.nhs.uk - or alternatively, please speak to a member of staff.

Consent - What does this mean?

Before any doctor, nurse or therapist examines or treats you they **must** have your **consent** or permission. Consent ranges from allowing a doctor to take your blood pressure (rolling up your sleeve and presenting your arm is implied consent) to signing a form saying you agree to the treatment or operation. It is important **before** giving permission that you understand what you are agreeing to. **If you do not understand – ask.** More detailed information is available on request.

How to comment on your treatment

We aim to provide the best possible service and if you have a question or a concern about your treatment then the Patient Advice and Liaison Service (PALS) are always happy to try to help you get answers you need. You can contact PALS on **0800 917 6039** or
E-mail: PHT.pals@porthosp.nhs.uk who will contact the department concerned on your behalf.

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