



**West Hertfordshire
Teaching Hospitals**
NHS Trust



A guide to...

Wrist Fracture

Patient Information

Watford General Hospital
Hemel Hempstead Hospital
St Albans City Hospital
West Hertfordshire Therapy Unit

Wrist Anatomy



The wrist is an articulation of your carpal (hand) bones and your radius and ulna (forearm) bones and is designed to roll, spin and slide. It is common to fracture your scaphoid, triquetrum, radius or ulna. It normally takes six weeks for the bone to unite (heal). Once the fracture begins to heal it is important to keep the wrist moving to reduce stiffness.

The treatment of this may usually start with a plaster of paris and you may attend Fracture Clinic after your injury to monitor how the bone is healing and give further guidance. You may be provided with a collar and cuff sling to help reduce the swelling and pain in the hand and wrist however follow the advice of your doctor following your most recent fracture clinic appointment. You may be referred to Physiotherapy to progress your rehabilitation for your wrist.

Frequently Asked Questions

When can I drive?

This varies from patient to patient and the type of car you have. We advise you not to drive until you are safe to control the car in an emergency situation. You must check that you can use all the controls, and may start with short journeys initially. You may need to inform your insurance company of your injury.

When can I return to work?

This will depend on your job. You may not be able to work for several weeks. However, if you are involved in lifting, overhead activities or manual work then this may be longer. You can discuss return to work with your physiotherapist, consultant or GP. If you need to be signed off, this will need to be done by the doctor. You will need to discuss with your employer regarding an individual work based risk assessment prior to returning.

When can I participate in my leisure activities?

Your ability to start these activities will depend on your pain, range of movement and the strength that you have in your upper limb. Usually you can return to normal daily activities within six weeks, except weight lifting. Sports involving upper limb movements may not be played for at least 12 weeks as advised by your physiotherapist. Please discuss your desired activities with your physiotherapist, so that advice and exercises can be tailored to your individual needs.

Exercise Advice

- Use pain-killers and/ or heat/ice packs to reduce the pain before you exercise.
- It is normal that you can feel aching, discomfort or stretching when you have completed exercise.
- If you experience pain that persists (e.g. more than 30 minutes), or increases in intensity, it is an indication to change the exercise by doing it less forcefully or less often. If this does not help then please discuss this with your physiotherapist.
- Do short frequent sessions (e.g. 5-10 minutes, four times a day) rather than one long session.
- Gradually increase the number of repetitions that you do but aim for the number of repetitions your physiotherapist advises (the numbers given in this booklet are rough guidelines).
- Fit them into your daily routine! Make it a habit.

If you experience any of the following symptoms please inform doctors at Fracture Clinic or your physiotherapist so they can explore this further:

- Pins and needles or numbness down your arm/hand.
- If you are struggling to move your arm at all.
- If you are experiencing pain symptoms anywhere other than at the site of the original injury or surrounding area.

Wrist Exercises

Hold each exercise for two to three seconds and repeat 10 times, 3 times a day. You can watch these videos by scanning or clicking on this QR code:



Assisted Wrist Flexion

- Have your forearm supported on a table with your hand over the edge and palm facing down.
- Allow your hand to drop down and gently assist the movement with your other hand.



Assisted Wrist Extension

- Have your forearm supported on a table with your hand over the edge and palm facing down.
- Gently assist the wrist backwards until you feel the stretching at the inside of the forearm.



Prayer Stretch

- Have your elbows supported on a table, slowly slide your elbows away from each other whilst keeping your palms together.
- You will feel the stretch at the inside of the wrist/forearm.



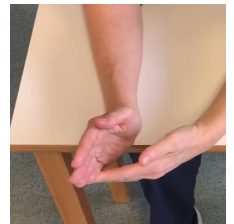
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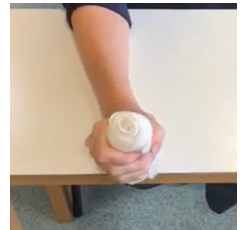
Assisted Radial and Ulna Deviation

- Have your forearm supported on a table with your hand over the edge and palm facing inwards towards the other hand.
- Allow your wrist to drop down towards the floor and gently assist the movement with your other hand.
- Then complete the opposite motion by gently assisting the movement of your wrist towards the ceiling with your other hand.



Grip Squeezes

- Open then close your hand, making a fist and ensuring you bend all the joints in your fingers. Then open the fist, extending the fingers completely.
- Progression: hold a soft ball/ ball of socks. Squeeze the ball as hard as possible without pain.



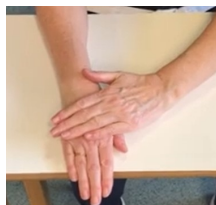
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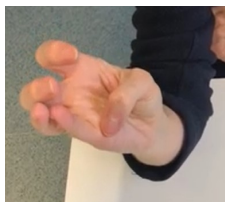
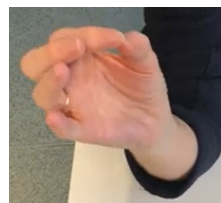
Assisted Supination and Pronation

- Have your forearm supported on a table with your hand over the edge and palm facing inwards towards the other hand. Keep your body and shoulder still.
- Rotate your palm so that it is facing the ceiling and gently assist the movement with your other hand.
- Then complete the opposite motion by gently assisting the rotation of your palm so that it is facing the floor.



Thumb Opposition

- Place the tip of your thumb in contact with each of the tips of your fingers.
- When the thumb reaches the tip of the little finger, slide the thumb down the little finger towards the crease under the little finger.



If you are unsure about any advice or information, please arrange to contact fracture clinic or contact the Physiotherapy department using the below contact details.

How to contact us

West Hertfordshire Therapy Unit
Jacketts Field
Abbots Langley
Hertfordshire
WD5 0PA

Tel: 01923 378130

Email: westherts.opphysioadvice@nhs.net

Website: www.westhertshospitals.nhs.uk/physiotherapy

If you need this leaflet in another language, large print, Braille or audio version, please call **01923 217187** or email westherts.pals@nhs.net



Author	Priya Khosla
Department	Outpatient Physiotherapy
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