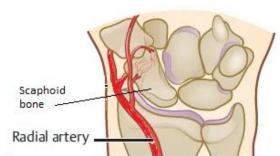


Scaphoid injury Advice

The scaphoid bone is one of eight small wrist bones which fit between the forearm and hand bones, and which allow the complicated, yet delicate movements of the wrist.

The scaphoid sits below the thumb and is shaped a bit like a kidney bean. A fall on the outstretched hand puts heavy stress on this bone, which can cause either a small crack through the middle of the bone or a complete break into two pieces.





The blood supply to the scaphoid presents a problem as only one small artery enters the bone, at the end that is closest to the thumb (far end). If the fracture tears the artery, the blood supply is cut stopping the part of the bone close to the forearm (near end) getting the oxygen and the healing nutrients it needs.

When this happens healing can be slow (delayed union) or it may not happen at all (non-union).

Sometimes this poor blood supply leads to a condition where the bone close to the forearm (near end) actually dies. This may cause continuing pain, deformity and arthritis and is called **Avascular necrosis (AN). AN becomes easy to see on X-rays several months after the injury.** This is why we treat possible scaphoid fractures by putting your wrist in a splint or a cast and an elevation sling.

Treatment

Standard X-rays may not pick up all scaphoid fractures (between 1 and 2 in every 10 scaphoid fractures may not be seen on the initial X-ray), so you will probably have been told that there was no evidence of fracture on your x-ray and that you need to return for an ED Review Clinic appointment in about 10-14 days. It is important that you keep this so that we can continue to treat you and prevent possible problems in future. At this appointment you will be reexamined by a senior doctor/ Nurse Consultant who will decide what further

investigations of your wrist, if any, are needed. They should also be able to give you an idea of how long your injury will take to heal.

If advised by the doctor/nurse that you have completed your investigations or treatment, you may be told that physiotherapy is required.

The physiotherapy service operates a self-referral process and so you will need to arrange your own appointment via

abuhb.nhs.wales/hospitals/a-z-ofservices/physiotherapy/bone-joint-musclephysiotherapy-services-musculoskeletal/ or by scanning the QR code



If you are unable to do this electronically you should call 01495 768715 between 8.30am and 4.00pm Monday to Friday.

What can I do to help the healing process?

Smoking can affect bone healing as it causes the blood vessels to become narrow. Because the blood supply to the scaphoid is already poor if you can avoid smoking it will help with the healing of your fracture. If you need help and advice to stop smoking contact: **Help Me Quit** Freephone 08082528216 *Or https://www.helpmeguit.wales/*

Things to remember	Things you need to look out for:
 If you have been given a splint It is important that you wear it all the time If your injury occurred in the last 2 days and your wrist is swollen it is important to keep it elevated – that means higher than your heart -to reduce any swelling You should exercise all the parts not in the splint/ plaster cast, to stop them becoming stiff. Take the recommended medication to relieve the pain – this can be bought over the counter from a pharmacy or local shops. Follow the instructions on the packet/bottle 	 your wrist becoming more painful tingling in your fingers your fingers becoming pale/blue or very cold If you do have any of these symptoms and your wrist is in a plaster – elevate your arm for 30 mins if your wrist is in a splint loosen it a little and then elevate your arm for 30mins If this does not improve things then you should return to the ED/MIU where you were seen straight away.

What should I take for Pain?

Painkillers, such as **Paracetamol**, are useful to ease pain, but it is best to take them regularly for a few days or so rather than every now and then.

They can be bought over the counter from a pharmacy or local shops. Make sure you don't take any other product containing Paracetamol.

If Paracetamol doesn't help at all despite taking the recommended dose, then try changing to Ibuprofen 400 mg three times a day. You can also take both drugs – speak to a pharmacist about the best way to do this.

If you have been advised not to take Ibuprofen in the past or are on any blood thinning tablets then avoid Ibuprofen.

With all medication it is essential that you follow the instructions on the packet or bottle carefully.

Anti-inflammatory painkillers (like Ibuprofen) relieve pain and may also limit inflammation and swelling, however if you are pregnant or trying to get pregnant you shouldn't use them.

Side effects sometimes occur with anti-inflammatory painkillers - stomach pain and bleeding from the stomach, are the most serious. Some people with asthma, high blood pressure, kidney failure or heart failure may not be able to take them either.

You can buy Ibuprofen at pharmacies both in tablet and gel form. There is less risk of side-effects with the gel, however, the amount of the drug that gets into the bloodstream is much less than with tablets and it is important that you use enough gel.

If you are concerned about your progress, or if you have not been contacted within 10 days, we advise you to contact the Emergency Department/MIU department where you were seen.

References: http://patient.info/health/scaphoid-wrist-fracture