

INFORMATION FOR PATIENTS

Radial head fractures

This leaflet intends to educate you on the immediate management of your arm fracture. It also contains exercises to prevent stiffening of your elbow, whilst your fracture heals.

What are radial head fractures?

They are a break in one of the bones between your elbow and your hand, which helps to bend, straighten and rotate your forearm. They are often sustained when trying to break your fall with an outstretched arm.



Radial Head Fracture

Management

Radial head fractures are managed conservatively as they are stable, meaning they are not put in a plaster cast. This means you are able to move the joint as pain allows. Moving the joint is vital to avoid stiffening on the joint itself and tightening of the surrounding muscles. In the beginning, your elbow joint will feel very stiff and painful but this will improve with time and pain relief.

It usually takes approximately 6 weeks for the bone to heal and you should avoid heavy lifting and weight bearing during this time period. You may have a sling initially, but it is important to remove this as comfort allows and move your elbow.

Day-to-day

It will not cause any further damage to use your arm for everyday activities, but avoid lifting heavy objects when cooking, for example. Initially your arm will be swollen and painful limiting your activities. Slowly increase what you do each day as the pain and swelling improve.

You can only return to drive once you feel confident in your ability to perform an emergency stop and contact your insurance provider for advice.

Returning to work depends on how physical your job is, and light duties may be advisable to begin with.

You can only return to contact sport 6 weeks following the injury, but non-contact sport can be recommenced once pain allows.

Pain management

Your arm will be swollen and very painful in the first few days, which is to be expected as part of the healing process. Utilising an ice pack or frozen bag of vegetables can aid with relieving these symptoms. Use a towel to avoid applying directly to the skin, and do this for 20 minutes a time, 5 times a day. Elevating your arm will also assist in reducing the swelling, ensuring your hand is above your elbow when out of your sling.

Over-the-counter analgesia, such as paracetamol and ibuprofen, will also reduce your symptoms. If you require further information on pain relief, speak to your GP or pharmacist. Ensuring pain is to a minimum, allowing you to move your elbow, is vitally important.

Exercises

It is very important to start the following exercises as soon as possible to prevent stiffening and losing range of motion within your elbow. They should be done as pain allows, with some discomfort being acceptable. If a sharp shooting pain is provoked then ease off. However, gently moving your elbow should begin to decrease the pain and not cause further damage. It is important to move your hand and shoulder as well, if they aren't injured, as they too can become stiff.

If you have been given a sling, try to wean out of it as soon as possible and remove initially for your exercises. It may be beneficial to remove it at night time to begin with and progress to only wearing it in busy places before discarding it altogether. Doing the following exercises consistently is essential to prevent stiffening, and we recommend doing them little and often throughout the day.

The exercises:

1) Bending your arm (also known as flexion)

Bend your elbow as much as possible and use your unaffected side to apply gentle pressure and push it further. Hold at the point of a stretch for 30 seconds and repeat 3 times a day.



2) Straightening your arm (also known as extension)

Sitting on a chair or with your arm over the edge of a table let gravity straighten your arm towards the floor. You can push with your other hand to straighten further or hold a weight in your injured arm's hand. Allow the stretch for 30 seconds. Repeat 3 times in the day.



3) Pronation/supination

Rotate your forearm as shown in the picture so your hand is facing the floor and then rotate to face the ceiling. Hold at the point you feel a stretch in both directions for 5 seconds and repeat 10 times.



You may require one-to-one physiotherapy if you are still struggling with your ankle after a few weeks of following this advice. If so, please contact us – details below.

Clinic 10, Physiotherapy Department
Telephone: 01623 672384

King's Mill Hospital
Mansfield Road
Sutton in Ashfield
Nottinghamshire
NG17 4JL

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 622515

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet (if relevant) please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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