
Thumb sprain / fractures

Information for patients

What is a thumb sprain?

Movement of the thumb occurs at the joints between the small bones. The bones are held in place by strong ligaments that encircle the joint and control the direction of movement when the tendons and muscles contract. These ligaments can be overstretched and some of the fibres may tear when the thumb unexpectedly contacts a firm object or is suddenly twisted.

In some cases the ligament can tear off a small piece of bone when the sprain occurs. This is termed an 'avulsion fracture'.

Thumb sprains usually occur in the middle joint (the metacarpophalangeal joint) of the thumb although occasionally they can also occur at the tip joint. The ulna collateral ligament, which is a strong ligament on the inside of the joint, is the most frequently injured.



What causes a thumb sprain / fracture?

Thumb sprain / fracture are usually caused by an unexpected force applied through the thumb. This may be through contact with the ground as a result of a fall, or if the thumb is caught on an object or fabric and hyperextended. Quite often they occur during sporting activities such as skiing or basketball.

What are the signs and symptoms of a thumb sprain /fracture?

You will notice swelling and bruising around the thumb and in the palm of your hand. You may experience some pain and stiffness, especially with active movement of the thumb and it may be difficult to see the bones and 'knuckles' of the thumb.

It is necessary to take an x-ray to check for any possible fracture as a result of your injury and to check that the bones are in the correct position.

What are the treatments available for a thumb sprain / fracture?

Initial x-rays are important to check for any fracture and make sure the bones are in the correct position and stable before deciding on which management is best. Most thumb injuries are treated conservatively without the need for any surgical intervention and the joint usually heals without any serious issues.

The options for non-surgical management are:

- Support the thumb with a 'standard' or bespoke thermoplastic splint for 2-4 weeks and then move as pain allows.

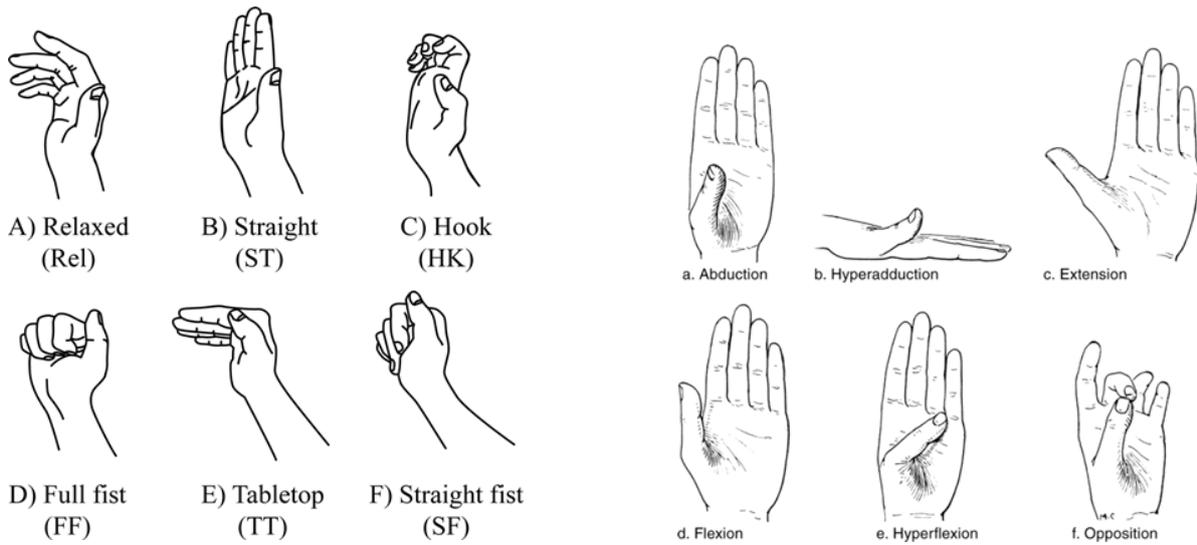
At this stage you will be contacted by a nurse working alongside the doctor at VFC and advised regarding removal of the splint and encouraged early mobilisation of the hand. You will be discharged from clinic at this stage.

- Support the thumb in a thermoplastic splint or plaster of paris for 4 weeks without movement.

You will then be contacted for a follow-up appointment to attend fracture clinic for removal of your cast and assessment at which point you should expect to begin active movement of your thumb.

Is there anything I can do to help myself?

- Simple painkillers, such as paracetamol or anti-inflammatories such as ibuprofen, can help manage pain and swelling. Please speak to your local pharmacist if you are unsure as to which medications you can safely use.
- Once you have seen your doctor and they are happy that your fracture is healing it is important to move your affected thumb early in order to prevent long-term stiffness. Resume daily activities again in order to restore function gradually. Below are a few simple exercises to begin with, aimed at regaining movement in the affected joint. They should be done often throughout the day e.g. 5-10 x 5 per day.



When can I return to work/sport?

You should avoid any heavy gripping, pushing or pulling for the first 6 weeks after injury but you can begin to use your fingers for light daily activities once the support is removed. You should avoid contact sports and heavy manual work for 8-12 weeks.

Who can I contact for more information?

If you require any further information you can contact us on the details below:

Fracture clinic (Clinic 3)

Outpatient department

Altnagelvin Hospital

Tel: 02871 345171 Ext: 213637