

Helping your shoulder to recover after a fracture

This leaflet can be made available in alternative languages / formats on request.

如有需要,本传单可提供其他语言/版式 此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona w innych językach/formatach.

Author: Therapy Team
Department: Therapy Services
Document Number: STHK0935

Version: 2

Review date: 27/06/2021

Shoulder fractures

Breaking or fracturing the bone at the top of your arm can be very painful. This leaflet will give you advice on how to manage in the weeks following your fracture.

For most fractures the shoulder is immobilised in a removable device such as a sling or collar and cuff. This will hold the arm still so that the bones may heal.

Keeping the shoulder still all the time can lead to stiffness in the shoulder joint. For this reason the removable device is chosen so you can do gentle exercises.



Swelling and pain

Fractures are painful. For this reason your doctor may prescribe painkillers. Taking these regularly will help you manage the pain. If the pain becomes severe or continuous we suggest you contact your GP for advice.

You may notice swelling in your arm, wrist or hand. If this happens, keep your hand raised as much as possible. This will help minimise the swelling.

Regular movements of your fingers, hands and wrist will also help to reduce any swelling in your hand.

Pain and swelling can be eased by using ice for about 15-20 minutes over the affected area. Wrap the ice in a damp towel to protect the skin.

Lifting

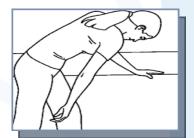
Until you have been given the go ahead it is advisable to avoid lifting with your injured arm. Once you have been advised to start lifting it is recommended to start with only light objects.

Exercises

It is important that you start to exercise your arm as soon as you are given the go ahead. By exercising and regaining normal movements, the feeling of stiffness and pain will gradually subside, and future problems will be limited.

You may find the elbow and wrist joints are stiff too, so keep these moving if they are not injured.

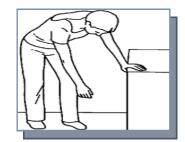
The exercises will be most effective if done regularly. It is advisable to do them 3-4 times a day. It is better to repeat the exercises a few times an hour rather than once a day for a long period (little and often).



Stand with your uninvolved hand leaning on a table. Let your injured arm hang down. Swing arm forwards and backwards. 10 times.



Stand with your uninvolved hand leaning on a table. Let your injured arm hang down. Swing arm side to side. 10 times.

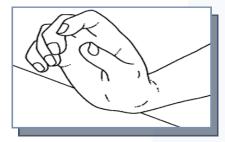


Stand with your uninvolved hand leaning on a table. Let your injured arm hang down. Swing arm around in small circles. 10 times.

Remove your arm from your sling hourly



Straighten your fingers as far as you can. Hold for a few seconds. 5-10 times



Bend your wrist up as far as you can. Hold for a few seconds.

Then bend your wrist down as far as you can. Hold for a few seconds. 5-10 times



Make a fist as tight as you can. Hold for a few seconds. 5-10 times



Bend your elbow and then straighten your elbow. Repeat 5-10 times

You might be referred for further physiotherapy to help to improve the strength and function in your shoulder.

If you have any questions or require further information please contact the department on the number on the back of the leaflet.

Contact information

Acute Musculoskeletal Therapy Team:

0151 676 5519

Patient Advice and Liaison Service (PALS):

0151 430 1376

St. Helens Hospital Marshalls Cross Road, St. Helens, Merseyside WA93DA Telephone: 0151 426 1600

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600

