

Supracondylar elbow fracture (undisplaced)



ORTHOPAEDIC FACT SHEET

Your child has a simple fracture just above the elbow.

These elbow fractures require only a backslab (partial cast) and sling. The backslab and sling should be placed under loose fitting clothing, not through the sleeve (Figure 1).

The first days

In the first few days there may be swelling of the elbow, hand and fingers. During this time it is important to rest as much as possible with the elbow and hand supported on pillows (elbow and hand above the heart) (Figure 2).

The sling may be removed when your child is lying down. Encourage your child to bend and straighten the fingers regularly. Check their fingers often for movement, feeling and circulation.

The elbow will be painful initially. Give a simple pain medication such as paracetamol (e.g. Panadol™) as needed following the directions on the packet, or as directed by your doctor. (Also see Orthopaedic fact sheet Fractures in children: caring for your child in an arm cast).

Follow-up

The local doctor will review your child, and remove the backslab, three weeks after the injury. An x-ray is not required.

After the cast is removed

When the backslab is removed, the skin may be dry and itchy. Bathe with warm water and soap, and apply a gentle moisturiser. Your child should begin moving the elbow. There will be marked elbow stiffness for a prolonged period (months). Usually full mobility returns with time but this may take up to one year. Physiotherapy is not recommended. Your child should avoid sports and heavy arm use (such as climbing) for one month after removal of the backslab.

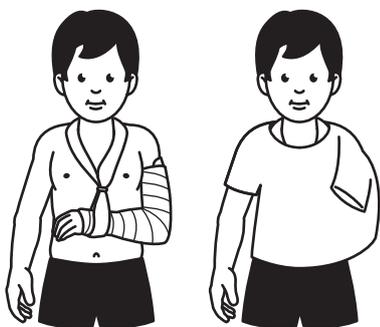


Figure 1. The backslab and sling should be placed under loose fitting clothing, not through the sleeve

When to seek urgent help

Severe pain and swelling, change in colour of the fingers (white or blue), numbness or pins and needles, and inability to move the fingers, are concerning signs that the cast may be too tight. If any of these signs occur, rest and elevate the limb for thirty minutes (Figure 2).

Take your child immediately back to the hospital emergency department, when, even after elevating the limb for 30 minutes:

- the fingers remain very swollen
- the fingers remain white or blue
- the child complains of pins and needles, or numbness in the fingers
- the child is not be able to move their fingers, or complains of pain when you move them
- there is severe pain that is not relieved by the recommended medication at the recommended dose.

Take your child to the hospital you attended, or the local doctor if:

- the backslab is cracked, soft, loose or tight, or has rough edges that hurt
- you are worried that an object has been pushed inside the backslab
- there is increasing pain.

Contact your child's doctor if you have ongoing concerns regarding:

- the shape of your child's arm
- how your child is using their arm.

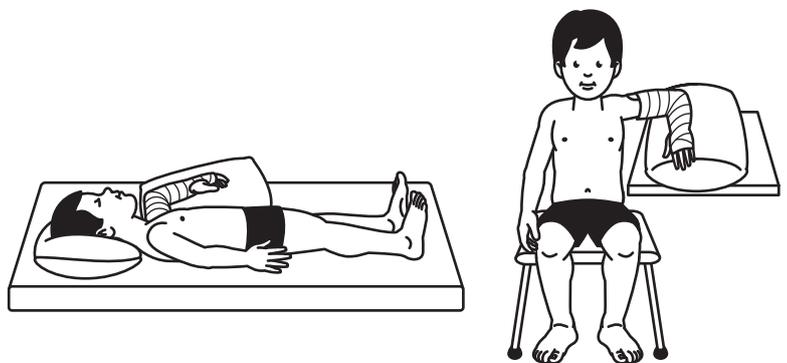


Figure 2. Raise the arm on a pillow when sitting or lying down