#### **Additional information**

If you have any questions, don't forget to write them down and speak to your doctors.

#### Further information can be obtained from:

NHS 111 Dial 111

Or contact your GP

Bluebell Ward,

Lister Hospital, Stevenage 01438 284008

Children's A&E, Lister 01438 284333

QEII Urgent Care Centre,

Welwyn Garden City 01707 247549

Lister Community Children's Nurses 01438 284012

QEII Community Children's Nurses 01438 288370

Patient Advice and Liaison Service 01438 285811

The information in this leaflet was adapted from:

www.prodigy.nhs.net www.kidshealth.org

#### www.enherts-tr.nhs.uk

Date of publication: October 2013 Author: Paediatric Information Group

Reference: Version: 3 (July 2017)
Review Date: July 2020

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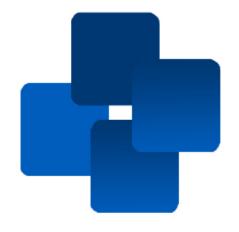


### **Fractures**

# Child Health Patient Information Leaflet







There are many different types of fractures that are common in children. This leaflet explains about some of the main fractures seen in the children's emergency department.

#### What is a fracture?

A fracture is the same as a break of the bone. Both terms are used but they both mean the same thing.

#### Common children's fractures

Children tend to have softer bones than grown-ups and their bones sometimes bend rather than fully break in two. These types of fractures are called **buckle** fractures. Another very common fracture that children have are **greenstick** fractures. This is where the bone has broken on one side only. Both of these types of fracture are very common in the bones of the arm by the wrist.

**Spiral** fractures can occur from a twisting force. It is usually seen in the arms and the legs.

Other fractures that are common in children are **growth plate** fractures. These types of fractures can happen wherever the bones join another bone such as at the wrist, elbow or ankle. These fractures sometimes need an operation to enable adequate healing to allow the bones to continue to grow properly.

Another fracture that children can have is an **avulsion** fracture. This is where a little chip of bone has been pulled off by a tendon or ligament. Common places for these are fingers, toes and the ankle.

Other types of fractures are:

**Closed** - where the fracture is within the skin and usually heals well without any more than a plaster.

**Open** - where there is a break in the skin which can be prone to infection, requiring antibiotics.

**Complicated** - where there is also an injury to the nerves or blood supply. These types of fractures usually require an overnight stay in hospital and possibly an operation.

#### Investigations

The most common investigation or test carried out to see if there is a fracture is an **X-ray**. This is a picture of the bones.

#### **Treatment**

Depending on the type of fracture, and the part of the body, the treatment can differ.

Most fractures have a **backslab cast**. This is plaster that only covers about half of the limb to allow for any swelling. This will stay on until you come back to the fracture clinic and it is then sometimes changed into a full plaster.

### Important - Do not get your plaster wet and especially remember not to stick things down it.

Fractures of the fingers are often treated with an Elastoplast splint called a **buddy** or **neighbour strapping**. This allows some movement of the finger with assistance of the finger next to it.

Another treatment is a metal splint called a **zimmer splint** to stop you bending your finger. With a fracture of the finger you will be seen in the plastics dressing clinic .

Some arm fractures do not need any splinting. A fracture of the humerus (the upper arm) has the arm put in a collar and cuff, allowing gravity to keep the healing bone in place. A fracture of the collar bone needs the arm to be rested in a sling.

## Remember - If you are in any pain you can ask for medicine to help.

This should be given at home to help relieve your pain. You can have Paracetamol and Ibuprofen. Some orthopaedic consultants prefer you not to use ibuprofen but don't worry, they will tell you if they don't want you to have it.

#### **Aftercare**

Children's fractures tend to heal quicker than grown-ups' and sometimes can heal in up to six weeks, although it may take you a bit longer to get back to your usual activities.

You will be seen in clinic until your fracture is healed or given instructions for further treatment at home. Occasionally you will need some physiotherapy to get you back to your usual activities.