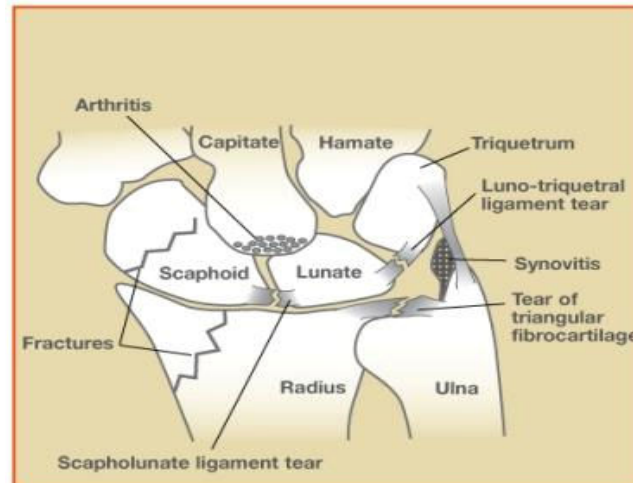


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Wrist Injuries:



TFCC Tear

- The Triangular fibrocartilage complex (TFCC) consists of a fibrous cartilaginous disc, ligaments and muscular tendons of the inside aspect of the wrist (that area along the line of the little finger). It is the major stabilizer of the wrist joint. Tearing of the TFCC is a common cause of wrist injury and it is frequently associated with clicking.
- Patients with a torn TFCC might show an asymmetry in forearm bone length on X-ray.

Causes:

- Compressive load to wrist, (golf, racquet sports, diving)
- Falls onto an outstretched hand
- Power drill injuries in which the drill binds and rotates the wrist instead of the bit
- Distraction force applied to the forearm or wrist
- Associated with wrist fractures
- ulnocarpal impaction syndrome (see below)

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Ulnocarpal Impaction Syndrome

This describes a condition of impingement of lower aspect of the ulna bone on the wrist bones of the hand. It is also a cause of wrist pain. It is a common inciting cause of degenerative tears.

Presenting symptoms of TFCC tears and impingement are:

- Painful grinding or clicking with wrist movement
- Weakness
- Tenderness on palpating the medial wrist

De Quervain's Tenosynovitis

De Quervain tenosynovitis is a tendonitis of the tendons situated along the outer aspect of the wrist in line with the thumb. It causes pain during thumb motion. It is an over-use injury caused by repetitive loading of the tendons controlling thumb movement.

Causes:

- Patients frequently are mothers of infants aged 6-12 months, and symptoms are often noted in both wrists.
- Day care workers and other persons who repetitively lift infants are frequently affected as well.
- De Quervain tenosynovitis can also develop in individuals who have sustained a direct blow to the described area.
- People engaging in over-use type activities, like racket sports, ten pin bowling, rowing and canoeing
- Poor computer ergonomics
- Excessive typing on mobile phones to send text messages.

Scaphoid Fractures :

The scaphoid is the most important carpal (wrist) bone. It is a very important stabiliser of the mid carpal joint. It is also the most commonly injured wrist bone.

Injury occurs due to a fall on an outstretched hand, the wrist is extended, and the forearm is twisted at the time of impact. This same mechanism may lead to ligamentous injury. Stress fractures of the scaphoid waist may occur with repeated stress on the scaphoid. These fractures typically occur in gymnasts, shot-putters and those involved in contact sports (e.g. rugby).

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"The Problem bone" -Scaphoid fractures can be difficult to treat for a variety of reasons:

1. Delay in Diagnosis
2. Delay in Healing due to poor blood supply

Signs and Symptoms:

- Radial wrist pain
- Tenderness palpation anatomical snuffbox
- Swelling
- Loss of grip strength
- Pain with wrist movements, particular extending the wrist backwards.

Your physiotherapy treatment may include:

- Protective bracing
- Taping to off load the over used muscles and tendons
- Massage and myofascial release of the forearm muscles
- Joint Mobilisation to increase movement and reduce pain
- Rehabilitation indicated to strengthen and improve wrist stability
- Electrotherapy for pain
- Acupuncture
- NSAIDS
- Cryotherapy (ice therapy)
- Ergonomic correction
- Corticosteroid injection (referral to specialist)

Medical therapy:

- Splinting of the thumb and wrist relieves symptoms.
- Immobilisation of the forearm in plaster for 4-6 weeks
- Anti-inflammatories e.g. NSAIDS
- Injection of corticosteroid into the tendon sheath.

Surgical therapy:

Surgery may be required if conservative therapy fails. Surgery options include arthroscopy, shortening of the forearm bones if an asymmetry exists, and stabilisation of a fracture site in the event of a failure to heal.

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