

Δρ. Χρήστος Κ. Γιαννακόπουλος

Ορθοπαιδικός Χειρουργός, Διδάκτωρ Πανεπιστημίου Αθηνών

REHABILITATION FOR NON-OPERATIVE TREATMENT OF RADIAL HEAD FRACTURES

Πύργος Αθηνών, Κτίριο Γ΄, 2^{ος} όροφος, Λεωφ. Μεσογείων 2–4, Αθήνα 115 27 **Τηλ.**: 210 7712792 | Κινητό: 697 20 999 11 | **E-mail**: cky@orthosurgery.gr

Early Passive Motion: (2-7 days post fracture)

Goals:

- · Control pain and edema
- Protect fracture site
- Minimize deconditioning
- Maintain range in joints around the effected region (shoulder, wrist, fingers)
- Prevent contractures

Intervention:

- Modalities, such as TENS and ice, for pain control
- Splint/Sling as direct by MD
- Monitor use and weight bearing instructions per MD
- Cardiovascular conditioning
- Gentle range of motion exercises of the shoulder, wrist, and fingers
- Passive flexion/extension of the elbow
- Passive pronation/supination of the elbow

Phase I maximum protection phase: (3-6 weeks post fracture)

Goals:

- Continue to control pain and edema as needed
- Minimize deconditioning
- · Regain range of motion within pain limits
- Prevent muscle atrophy

Intervention:

- Active assistive flexion/extension of the elbow
- Active assistive pronation/supination of the elbow
- Isometrics: flexion, extension, and pronation, supination
- Active assistive hyperextension of elbow (at 6 weeks)
- Gripping exercises

Phase II moderate protection phase: (6-8 weeks post fracture)

Goals:

- Regain full range of motion
- Actively work within newly gained range of motion
- Increase strength

Intervention:

Active flexion/extension of the elbow

- Active pronation/supination of the elbow
- Active flexion/extension in standing with wand
- Pulleys with eccentric control of the elbow with flexion/extension

Phase III minimum protection phase: (8 weeks post fracture)

Goals: Educate patient on proper joint protection and therapeutic exercises

Gain adequate strength in the forearm flexors and extensors to increase stability at the elbow

Strengthen the elbow flexors and extensors to gain full range of motion

Intervention:

- Resistive exercises: standing with weights, theraband resisted (flexion, extension, pronation, supination) exercises
- Self-stretching: flexion/extension, pronation/supination, shoulder flexion/extension, and wrist flexion/extension, ulnar deviation/ radial deviation
- Advance elbow extension with radial deviation and elbow flexion with ulnar deviation