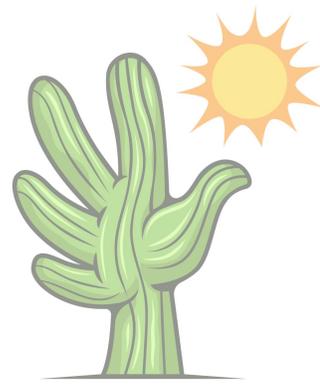


John Dunn, MD

Double Board-Certified Hand, Wrist, and Nerve Surgeon

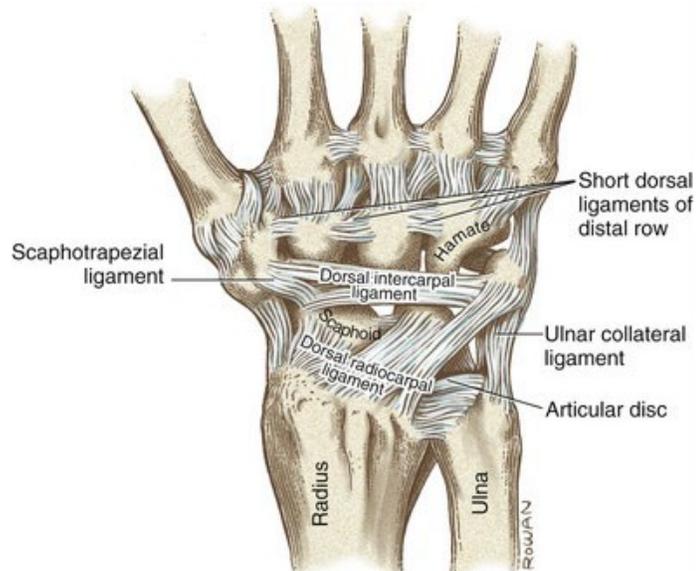
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WRIST SPRAIN



What is it?

- Wrist sprains occur most often after a fall onto an outstretched wrist.
- The ligaments on the back (dorsum) of the wrist tear.
- Sometimes a small piece of the Triquetrum bone are pulled off with the ligaments.
- Patients will have soreness and may not be able to lift objects or load the wrist (do push-ups).



Who gets it?

- Younger, active patients after an athletic or work injury.
- May be more likely in young women who have looser ligaments.

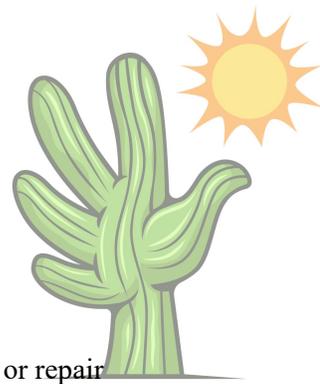
What can you do about it?

- X-Rays are usually obtained and can be helpful seeing a small (but inconsequential) fracture.
 - o X-Rays are also important to rule out other, more important injuries – like tearing more structurally critical ligaments or a distal radius or scaphoid fracture.
- For most patients, within 6 weeks your wrist should feel good enough to return to full activities.
- If not, a MRI may be considered.
 - o MRI are not routinely obtained unless symptoms persist and the diagnosis is not clear
- Injections can be helpful.
 - o Steroid injection – will reduce inflammation and return to activity.
 - o Platelet Rich Plasma – may be beneficial in healing injured structures. Its efficacy is not proven in the wrist – but has shown promise in other parts of the body.
- Surgery is reserved for the wrist sprain which causes long-term debilitating pain.
 - o Surgery for the condition is minimally invasive wrist arthroscopy

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Surgery:

- Surgery is done arthroscopy with a few small poke holes in the skin.
 - o A small camera and instruments work inside the wrist to identify, “clean up,” or repair damaged structures in a minimally invasive fashion.

Post-operative course

- Pain pills may be needed for the first 1-2 nights – but most people will be fine with just Tylenol.
- The black nylon sutures are removed at the first post-operative visit in 2 weeks.
- This suture is inert (does not react with your body) and is sturdy.
- You can text, type, and do light duties with the hand before the sutures are removed while the dressing is in place.
- Weight bearing and activity will depend on what is found inside the wrist. For most cases, you can return to full activity at two weeks if the wrist is only “cleaned up.”
- Therapy is beneficial.

Outcomes

- In a study among young, athletic population with a wrist sprains:
 - o 96% of patients need an average of 14 days off of activity before returning.
 - o Only 4% go on to every need arthroscopy.
 - o All patients returned to full activity.
 - o You are not pre-disposed to re-injuring the same wrist again after a wrist sprain.
- In a study reviewing TFCC ligament arthroscopy surgery:
 - o Surgery improved motion, grip strength, and pain.
 - o 87% went back to their original work.

Complications

- Risk to arthroscopic surgery include damage to ligaments, tendons, and cartilage and wrist stiffness.