Proximal Humerus Fracture

Information for patients, relatives and carers

January 2024
Proximal Humerus Fracture

This leaflet has been produced to give you general information about a proximal humerus fracture. It will provide advice and guidance as to what to expect following the injury and exercises to help. If you require further guidance, please do not hesitate to contact your physiotherapist.

What is it?
Your shoulder is a very mobile joint made up of your shoulder blade (scapula) and upper arm bone (humerus). A proximal humerus fracture occurs at the upper part of your humerus bone.

Why did it happen?
This type of fracture or break is often caused by falling on to your arm and can occur in any age group but is more common in adults over the age of 65.

Signs and symptoms:
- Pain
- Swelling
- Bruising
- Decreased movement of your shoulder

What should I expect?
You will be reviewed in fracture clinic, or your x-ray will be reviewed by a doctor in a virtual clinic soon after your injury and then again between 2-4 weeks later. If your bone is healing well, you may be discharged from the doctor, but your physiotherapy will continue for some time after.

The arm can be very painful especially in the first few weeks. It is common to experience bruising, stiffness of your shoulder and sometimes this can extend into the elbow and hand. The main aim of treatment is to prevent stiffness, reduce pain and restore function. It can take 6 to 12 weeks for your fracture to heal, however your symptoms will likely continue for some time after.

It is important to work hard with your exercises for several months after your injury. Improvement should continue for 12 - 18 months; with most people regaining a functional range of movement to perform day to day activities but you may not achieve full range of movement.
**How will it be treated?**

Most proximal humerus fractures do not need surgery but this depends on the type of injury. In some instances, surgery is required to fix the fracture or replace the joint. Your doctor will discuss this with you.

**Sling**

Most fractures involve a short period of immobilisation, usually wearing a collar and cuff for comfort. This is usually worn for 3 - 6 weeks depending on your fracture, you will be advised when you can start to wean from this. Your physiotherapist / orthopaedic team will guide you.

**Exercises**

Early shoulder mobilisation is important to increase your function and prevent long-term stiffness. You may begin this when advised to do so, usually around 2-3 weeks after your fracture. This leaflet, and your physiotherapist / orthopaedic team will guide you. **You can start moving the hand, fingers and elbow immediately.**

**How can I manage my pain?**

Regular pain relief is advised. If unsure, discuss with your clinician or pharmacist. It is common to get pain from your shoulder down into your arm.

You may find it more comfortable sleeping in an upright position at first, gradually lying flatter as your pain settles. Place a pillow behind your shoulder and elbow for comfort.

**Physiotherapy**

After leaving hospital or being seen in fracture clinic, you will be referred to physiotherapy. The physiotherapist will guide your movements and activities and may make changes to your exercise programme depending on your individual needs. It is important to continue regular pain medication to allow gentle movement.

**Armpit hygiene**

To wash under your arm, take your arm out of the sling and lean forwards slightly so that your arm hangs slightly away from your body. You can also do this in **sitting** if you have poor balance.

**Early rehab**

Within the first 2 weeks, recovery is based around comfort and completing hand, wrist and elbow movements to prevent stiffness.

We would encourage you to use the arm for light functional activities at the elbow such as using a knife and fork or doing up buttons of a shirt. Let pain guide you.

As the bone begins to heal, shoulder movements may be progressed and you will be advised when you can start moving by the orthopaedic team. Passive movements play a key role in avoiding shoulder
stiffness at this time. It is important to be consistent with your exercises to prevent long-term stiffness and dysfunction.

You may feel some mild discomfort during these exercises but if you feel a significant increase in pain then stop doing that particular exercise until you can seek advice from your physiotherapist.

Repeat these exercises 5-10 repetitions, 4 – 5 times per day

**Early exercises (first 0 - 2 weeks)**

### Elbow movement

Bend and straighten your elbow, using the other hand to help if needed.

Support your forearm and turn your palms up to face the ceiling and turn them down to face the floor as pain allows.

This movement should occur at your elbow and not your shoulder.

### Hand, wrist & finger movement

Move the wrist up and down.

Make a full fist and stretch your fingers out wide.
Later exercises: from 2 - 3 weeks
Again, all exercises must be performed within the limits of tolerable pain. Please do these exercises regularly at home, attempting at least 5 - 10 repetitions, 3 times per day. **Do not** force or stretch. Continue to take regular painkillers.

Seated exercise

Sitting down.

Support your painful side with your opposite hand. Slide your hands down your thigh as far as is comfortable, return to the start position.

Pendulum exercise

Resting your non-injured arm on a table, bend at the waist & let your painful arm hang forward.

Make a circular or forwards and backwards motion with your whole arm.

**Don’t do this if you have poor balance.**

Table walk aways

Rest your hands on the edge of sink or work top. Walk back until you feel discomfort. Nice and gently to start with.

You can wash under your armpit whilst the arm is supported.

*Image copyright belonging to Phisitrack.com*
Table top slides

Sit or stand. Place your hands on a table on a towel or kitchen roll.

Start with the hand of your painful arm on top of your other hand to help it. Slide your hands along the table, reaching forwards and straighten your elbows as much as possible. Slide your hands back. Do small movements to start with.

External rotation with a stick

Sit or lie down with both elbows bent at right angles.

Place a rolled towel between your elbow and side if sitting down. Hold a stick with both hands. Gently push the stick to move the hand outwards, keeping your elbow in at your side.

Active assisted flexion

Sitting down. Support your painful arm with the opposite hand. Gently lift the arm as far as it will move comfortably. Do not force.

When you feel comfortable with the above exercises, you may be able to progress on to the following but only do within limits of tolerable pain.
Assisted shoulder flexion

Lying on your back, elbow bent. Clasp your hands or hold at your painful arm’s wrist. Straighten your arms towards the ceiling.

If you can, you can take the arm overhead but only if it is comfortable.

Hand behind back

Stand tall. Relax your shoulders. Place one hand behind your back and gently slide it along your back to the midline. Gently release to the starting position. Help with your other hand if you can.

Nice and gently to start with. Let pain be your guide with this.

Physiotherapy

You will be referred to out-patient physiotherapy and an appointment will be sent out in the post. The physiotherapist will progress your exercises and assist in your recovery. Continuing the exercises at home will enable you to gain maximum benefit from your operation. This may continue for many months until both you and the physiotherapist are happy with your progress.

If you have not received a physiotherapy appointment within 2 weeks, please contact the physiotherapy team on the number(s) below.

‘Image copyright belonging to Phisitrack.com’
Physiotherapy locations

Please note, depending on the location of your GP, the physiotherapy provider may be different:

- If you have a Gateshead / Newcastle GP, your physiotherapy provider will be Tyneside Integrated Musculoskeletal Service (TIMS). If you have a query about your first appointment with TIMS, please contact the booking team on 0191 445 2643
- If you have a Durham GP, your physiotherapy care will come under Durham. Please contact the Queen Elizabeth hospital, physiotherapy department should you not receive your first appointment on 0191 445 2320
- If you have a GP that is outside of the Gateshead / Newcastle area your physiotherapy will be with the hospital affiliated to your GP practice. Should you not receive your first appointment, please contact physiotherapy reception on 0191 445 2320

TIMS physiotherapy centres

Royal Victoria Infirmary
Queen Victoria Road
Newcastle upon Tyne
NE1 4LP

Freeman Hospital
Freeman Road
High Heaton
Newcastle upon Tyne
NE7 7DN

Bensham Hospital
Fontwell Drive
Gateshead
NE8 4YL

Gateshead Queen Elizabeth Hospital
Queen Elizabeth Avenue
Gateshead
NE9 6SX

Blaydon PCC
Shibdon Road
Blaydon
NE21 5NW

SMOKING CESSATION

Evidence suggests that smoking can delay fracture healing times. In more extreme cases, it can prevent your fracture from healing at all. Stopping smoking during your recovery will likely aid in the fracture healing process. For more details, please see below.

Useful websites

If you would like further information about health conditions and treatment options, you may wish to have a look at the NHS website at www.nhs.uk or the following https://www.tims.nhs.uk/

For help with smoking cessation visit https://www.nhs.uk/better-health/quit-smoking/?WT.mc_ID=JanQuitSmokingPPC&gclid=EAIaIQobChMI_pL37N7U9QIVFDtCh0czA0OEAAAYASAAEglwF1D_BwE&gclsrc=aw.ds

Versus arthritis website: https://www.versusarthritis.org/
### Telephone numbers

<table>
<thead>
<tr>
<th>Description</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>During the hours of 8am – 5pm contact the orthopaedic department</td>
<td>0191 445 8500</td>
</tr>
<tr>
<td>During the hours of 8am – 4.30pm contact the physiotherapy department</td>
<td>0191 445 2320</td>
</tr>
</tbody>
</table>
| During the hours of 8am – 8pm. If you have a Gateshead or Newcastle GP, **TIMS** will be your physiotherapy provider | **Booking Team:** 0191 445 2643  
**Local Admin Team:** 0191 213 8800  
[https://www.tims.nhs.uk/](https://www.tims.nhs.uk/) |
| If you have a query about your first appointment with TIMS please contact our booking team on **0191 445 2643** |                    |
| If you are a current TIMS patient and have a query about your follow-up appointment please contact our local admin team on **0191 213 8800** |                    |
| Main Switchboard                                                            | 0191 482 0000      |
How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have.

If you have any suggestions or comments about your visit, please either speak to a member of staff or contact the patient advice and liaison service (PALS) on 0191 445 6129 (10.00 – 16.00, Monday to Friday).

You can also email PALS at ghnt.pals.service@nhs.net

Alternatively, you may wish to complain by contacting our complaints department:
Mrs Trudie Davies,
Gateshead Health NHS Foundation Trust,
Trust Headquarters,
Queen Elizabeth Hospital,
Sheriff Hill,
Gateshead,
NE9 6SX

The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Data Protection

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us to improve the services available, your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews and Statistics.

Further information is available via Gateshead Health NHS Foundation Trust website (Privacy - QE Gateshead) or by contacting the Data Protection Officer by telephone on 0191 445 8418 or by email ghnt.ig.team@nhs.net.

This leaflet can be made available in other languages and formats upon request