

# Carpal Ligament Avulsion

## Patient Information

Trauma & Orthopaedics



The Patient Information Leaflets page on the Trust website is available on the link:  
<https://www.wwl.nhs.uk/patient-information-leaflets> or scan the QR code.

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## Introduction



This ligament is on the back of your hand and the injury occurs when the wrist is bent too far the wrong way, spraining, or tearing the ligament and often pulling away a small piece of bone (known as a ligament 'avulsion'). Symptoms include pain, bruising and swelling. An x-ray of your hand may show a very small piece of bone; this happens where the ligament is attached and gets stretched suddenly during the injury.

The time to heal depends on how bad the injury was, but most recover within six weeks.

## Injury recovery

You may have a removable splint and / or your finger may be strapped to the next finger. This supports your hand in the early stages of healing to help reduce pain and allow movement. The splint can be removed as soon as tolerated and at rest, to allow gentle wrist movements.

Take simple painkillers e.g., paracetamol for as long as you need to, do not take more than the recommended dose. Your local Pharmacist is a useful source for pain relief information.

Smoking slows down the healing process. We advise that you stop (at least whilst recovering from your injury). Speak to your General Practitioner (GP) or go online at:

<https://www.nhs.uk/smokefree>

Use your hand as normally as possible for light activities as pain allows. Avoid heavy lifting, ball and contact sports for 6 - 8 weeks. Make sure you do not wear the splint after 4 weeks.

## Caring for your injury

**Elevate your hand for the first 24 – 72 hours after your injury.** Sit more than usual and keep your hand lifted on a cushion (chest high). This will help to reduce the swelling.

**Using ice can help with your pain and swelling.** Wrap a damp tea towel around a bag of frozen peas and place on your wrist and hand for up to 15 minutes, each hour, as needed.

Do not use ice if the feeling in your hand is reduced, or if you have skin problems.

Remember to wear your splint for no more than four weeks. You can take the splint off to wash, and when comfortable.

## Exercise



Gentle movement of the elbow, fingers and thumb creates blood flow to the injury. This helps it to heal and reduces swelling. Attempt to make a fist and then straighten your fingers as soon as possible.

Start wrist exercises early to prevent stiffness but avoid any sharp pains in the first 2 weeks, build up gradually.

Wrist movements will take up to 6 weeks to return.

Do exercises 'little and often' but at least four times per day.

## Disclaimer

Not all exercises are suitable for everyone, and while every precaution has been taken in selecting these exercises, they do not come without risks. If you have any concerns regarding your injury, or whether you should partake in the exercises, then you should consult your GP or Physiotherapist before beginning any exercises in this leaflet.

It is quite normal to feel some discomfort following exercise, but it is important that this discomfort eases within 2 hours of finishing the exercise and does not have an overall negative effect on your symptoms.

The exercise plans shown in this leaflet are designed to be used as a guide and a point of reference; they can be modified and progressed under the supervision of your Physiotherapist.

## Frequently asked questions

### Driving

You must not drive with the splint / cast on. It is your own responsibility. You are allowed to drive when:

- You can safely control the car.
- You are no longer using the splint/cast.
- You can grip the steering wheel/gear stick safely.
- You can perform an emergency stop.

### Work

This depends on your individual situation. You can return to work when you feel able to do your job. Consider a phased return where needed / possible.

### Sports

You should avoid contact / ball sports for 6-12 weeks. You can exercise your lower body as soon as you feel able and safe to.

## Further Advice

If you have any concerns regarding your wrist, contact:

**Fracture Clinic Helpline:** **01942 822595** please leave a message with name, telephone number and brief description of reason for calling. We will aim to call you back within 24 hours Monday to Friday 8.30am until 5:00pm (please note it will be Monday if you call over the weekend).

If you have any urgent concerns out of hours, please call 111.

## Adult MSK Physiotherapy Self-Referral

If you are struggling to regain your movement or get back to normal activities, you can self-refer to **Physiotherapy**. A referral form can be found on this webpage:

<https://www.wwl.nhs.uk/adult-msk-physiotherapy-self-referral>



Please scan the QR Code to access the website.

## Telephone Numbers:

**Boston House Health Centre** Telephone 03007071113

**Leigh Infirmary** Telephone 03007071597 / 03007071595

**Platt Bridge Health Centre** Telephone 03007071772

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## Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

## Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

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## Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the positives and negatives of each option for me?
3. How do I get support to help me make a decision that is right for me?



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## How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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