

# DISTAL RADIUS FRACTURES: ACCELERATED REHABILITATION

Traditional management of distal radius fractures has been 6 weeks of immobilisation. New evidence now suggests a shorter period of immobilisation may be more beneficial

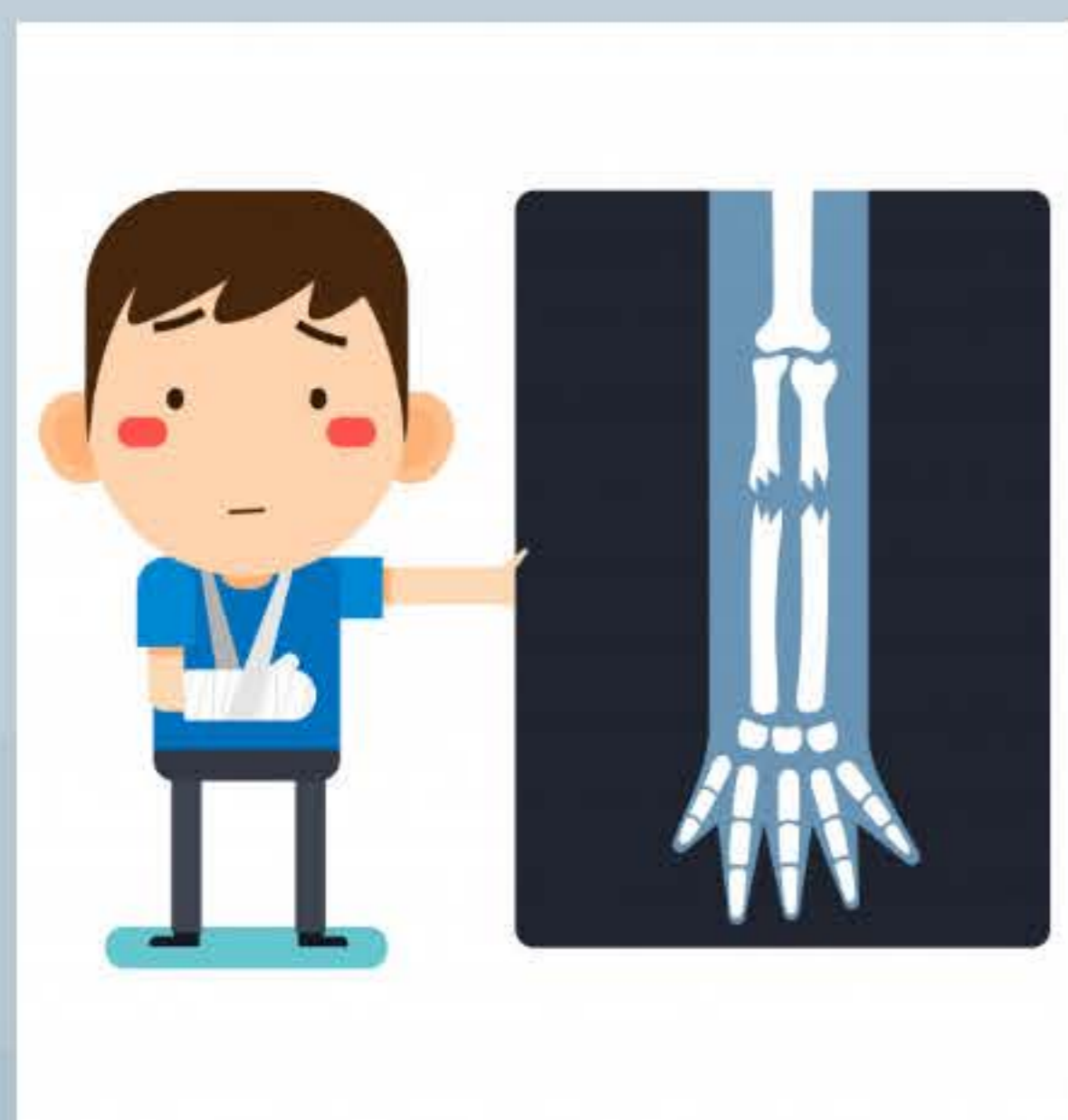
## Distal Radius Fracture

### Instability factors on x-ray:

<4 = accelerated rehab

>3 = traditional rehab

01



### Instability Factors:

- Dorsal angulation >20°
- Intra-articular fracture
- Associated ulna fracture
- Dorsal comminution
- Radial shortening >2mm

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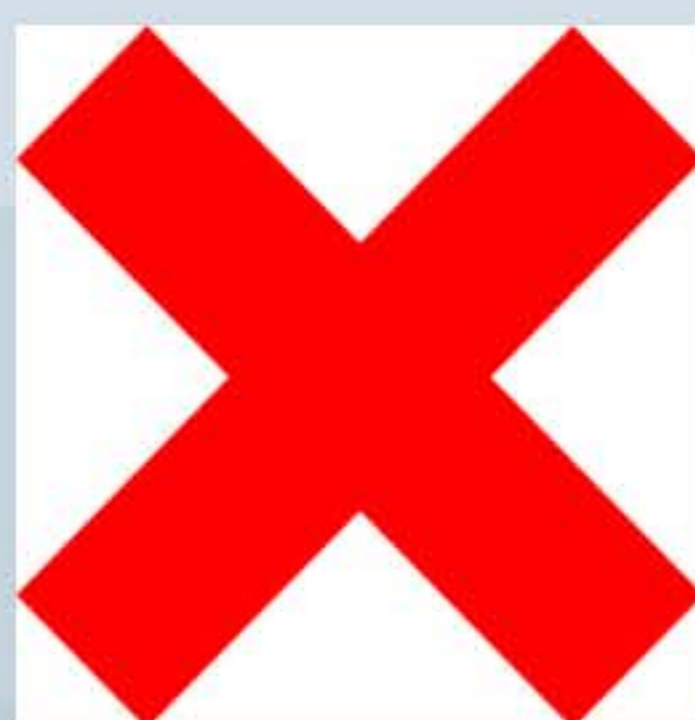
### Accelerated Rehabilitation:

- 3 weeks immobilised in a cast and then;
- 3 weeks in a removable splint

### Benefits:

- Early and progressive movement and exercise
- Decreased secondary complications
- Improved and accelerated functional recovery

03



04

### Barriers:

- Unaware of new evidence
- Orthopaedic buy-in
- Agreeance on instability factors

### References

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