INFORMATION FOR PATIENTS

Clavicle fractures

This leaflet intends to educate you on the immediate management of your clavicle (collarbone) fracture. It also contains exercises to prevent stiffening of your shoulder and elbow.

What are clavicle fractures?

The clavicle (collarbone) is a bone connecting your sternum (breast bone) to your scapula (shoulder blade). It is one of the most common bony injuries. It has generally been caused by falling onto the arm or shoulder, or from it being knocked against an object or person.

The clavicle is near other structures such as nerves and vessels but these are rarely affected with a break. The clavicle mainly fractures in the middle third of the bone.

Management

Clavicle fractures are managed conservatively the majority of the time, if they are stable, meaning they are not put in a plaster cast. Sometimes surgery is required but this is rare. Usually you will be given a sling to wear for between 2-6 weeks. How long your discomfort persists will guide when to remove the sling. The sling should be worn through the day but you can remove it for personal hygiene and your exercises. You can wear the sling at night if you find it is more comfortable.

Moving your neck and elbow in the early stages is vital to avoid stiffening of those joints and surrounding muscles. Over time your pain will settle and you will find you can move your arm more easily.

It usually takes approximately 6 weeks for the bone to heal and you should avoid heavy lifting and weight bearing through your arm during this time period.

Once you are out of the sling you can begin to challenge your shoulder more. Allow pain to guide how much you do.

Avoid returning to contact sports for at least 10-12 weeks and you can be guided by your physiotherapist regarding this.
**Day-to-day**

Use a pillow between your arm and body to make sleeping more comfortable. You may find sitting more upright in bed assists a good night’s sleep. You can only return to drive once you feel confident in your ability to perform an emergency stop and contact your insurance provider for advice. Returning to work depends on how physical your job is, and light duties may be advisable to begin with.

**Pain management**

Your arm will be swollen and very painful in the first few days, which is to be expected as part of the healing process. Utilising an ice pack or frozen bag of vegetables can aid with relieving these symptoms. Use a towel to avoid applying directly to the skin, and do this for 20 minutes a time, 5 times a day. Elevating your arm will also assist in reducing the swelling, ensuring your hand is above your elbow when out of your sling.

Over-the-counter analgesia, such as paracetamol and ibuprofen, will also reduce your symptoms. If you require further information on pain relief, speak to your GP or pharmacist. Ensuring pain is to a minimum, allowing you to move more, is vitally important.

**Exercises**

It is very important to start the following exercises as soon as possible to prevent stiffening and losing range of motion within your shoulder. They should be done as pain allows, with some discomfort being acceptable. If a sharp shooting pain is provoked then ease off.

It is important to exercise your hand and elbow from day 1 also.

We recommend removing the sling to do these exercises and repeat them little and often throughout the day.

**The exercises**

1) **Pendulum arm swing**

Remove your sling and bend forward supporting yourself with your uninjured side on a table. Swing your arm forward and back, left and right. You can also draw circles. If this causes discomfort, sway your body for momentum to move your arm.

2) **Elbow flexion/extension**

Remove your sling and support your elbow with a pillow. Bend and straighten your elbow as the picture shows. Hold at the point of stretch for 5 seconds.

3) **Shoulder blade squeezes**

Draw your shoulder blades together as if you are trying to make them kiss. Hold them in that position when you feel the squeeze for 5 seconds and then relax. Repeat 10 times in a row and 3 times a day.
4) After 2 weeks begin shoulder elevation

Remove sling and lift your arm out to the side, to 90 degrees, as the picture shows. Let discomfort guide when to stop but do not go above shoulder height. Repeat this directly in front of you. Do these little and often throughout the day.

Factors that can influence healing

Staying on top of the following factors can help move the healing process along and give your clavicle the best chance of a swift recovery. It is important to note your collarbone may heal with a ‘lump’ where the fracture site was. This is normal and nothing to be concerned about.

Stress relief - utilise techniques such as mindfulness, meditation and deep breathing cycles. Speak to your health care professional for more information.

Sleep hygiene - consistently getting 6-9 hours is recommended by the NHS. Only use your bedroom for sleep, e.g. not for TV.

Nutrition - make sure you have a balanced diet. Vitamin D has been correlated with reduction in joint pain.

Alcohol – avoid alcohol in the early stages of healing (first three days). Evidence has shown this can slow down recovery and increase the chances of re-injury.

Smoking – this has been linked with musculoskeletal pain and delayed healing.

For more advice see smoking cessation or ask you therapist for more information.

General exercise – general cardiovascular exercise, such as a brisk walk each day, stimulates blood flow to the area.

You may require one-to-one physiotherapy if you are still struggling with your ankle after a few weeks of following this advice. If so, please contact us – details below.

Clinic 10, Physiotherapy Department
Telephone: 01623 672384

King’s Mill Hospital
Mansfield Road
Sutton in Ashfield
Nottinghamshire
NG17 4JL

Further sources of information
NHS Choices: www.nhs.uk/conditions
Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)
PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 622515
Newark Hospital: 01636 685692
Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.
This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet (if relevant) please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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