

australianhand therapyassociation

FINGER DISLOCATION

ABOUT

A dislocation of a joint is where the two joint surfaces are no longer anatomically aligned with each other. Most dislocations occur as the result of a fall or a sporting incident such as a ball to the end of the finger. Direct forceful impact, forceful twisting of the bones of the joint, or a high-energy muscle contraction in opposing directions can cause a dislocation. These forces push the joint into an abnormal position and the ligaments that support the joint and normally hold the bones in the correct place give way allowing the bones to slip out of position. Some dislocations will be associated with a fracture in the bones involved, also known as an avulsion. This may make the treatment more difficult and the outcome more uncertain.

A dislocation can happen at any joint in the finger or thumb. The most common joint to be dislocated is the middle joint of each digit, this being the proximal interphalangeal joint (PIPJ) and the metacarpophalengeal joint (MCPJ) in the thumb. The direction of dislocation will depend on the forces applied at the time of the injury. A finger dislocation is described in terms of the position of the end of the finger compared to the rest of the hand i.e. dorsal – the end of the finger has shifted up towards the back of the hand; volar – the end of the finger is positioned towards the palm; or lateral – the finger is out to the side. A dorsal dislocation, or hyperextension injury, of the finger joints occur most frequently.

SYMPTOMS

- Deformity, crooked or misshapen finger
- Pain
- Swelling
- Difficulty moving the finger
- Feeling of instability, looseness or floppiness
- The dislocation may cause a break in the skin forming an open wound
- In severe cases there may be changes in sensation (numbness/tingling) and colour in the finger

LATERAL VIEW OF FINGER



Immediate medical attention to assess the finger and reduce the joint back into its normal position is required. This can be a simple task, which is performed under local anaesthetic, and if the injury is more complicated it may require a surgical operation under general anaesthetic. The majority of finger dislocations are simple and can be manipulated back into the correct position easily. This is usually done in the emergency department. It is not wise to reduce the dislocation yourself as you may injure underlying structures.

Should the ligaments not heal satisfactorily there is a risk that the joint will become unstable and prone to further dislocations. An unstable joint may also cause loss of function in the finger. Early intervention and hand therapy can help to minimise this risk.

HOW HAND THERAPY CAN HELP

Following the initial treatment to reduce the dislocation, early referral to hand therapy can help to protect the healing structures and maximise your chances of regaining full movement and function of the finger or thumb. You may need to wear an orthosis (support) for a period of time and attend therapy to help mobilise the joint while protecting it from further damage. Your therapist will provide you with the appropriate means to control the swelling and educate you on your functional capabilities and precautions during your recovery process.

The precise nature of the rehabilitation program will depend on the type of injury sustained and each session will be tailored specifically to your needs. For most simple cases there will be a return to normal function. A dislocation is a serious injury and in some cases there may be residual swelling or stiffness of the joint, which could require further therapy or surgical intervention. Any dislocation where there is a fracture involving the surface of the joint is likely to have some long term stiffness and is also at risk of developing arthritis in the joint. The arthritis usually takes many years to develop but can occur rapidly in some instances. HAND THERAPY IS THE ART AND SCIENCE OF REHABILITATION FOR THE UPPER LIMB - SHOULDER TO HAND

The Australian Hand Therapy Association provides support for its members through continuing education, professional development, networking and representation at state and national levels.



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