

Wrist splints in children as effective as casts

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In children with wrist fractures, a splint is as effective as a cast and provides greater comfort and easier hygiene, found a study published in *CMAJ (Canadian Medical Association Journal)*.

Distal radius fractures — [wrist fractures](#) — are the most common break in [children](#) and a frequent reason for emergency department visits. The usual treatment is a short arm cast for four to six weeks with follow up visits to an [orthopaedic surgeon](#).

The study, a [randomized controlled trial](#) with 92 children aged 5 to 12 years, included 43 children with distal radius fractures who were treated with splints and 49 in casts. Participants had acceptably angulated fractures (transverse or greenstick) of 15 degrees or less. The splint group was free to remove the splint to wash in the first four weeks, but otherwise, like the cast group, kept the splint on for the duration of therapy. After six weeks, the participants were assessed by a physiotherapist who did not know which treatment they had received.

"Our results support the growing body of evidence that promote splinting as a suitable alternative to casting for specific distal radius fractures," writes Dr. Kathy Boutis, Staff Physician and Associate Scientist at The Hospital for Sick Children (SickKids), and coauthors.

As well, patient and parental satisfaction with the splint was higher. Of the children with casts, 68% would have preferred to have the splint and only 12% of the splint group participants would have preferred the cast.

"There were no differences in maintaining fracture stability, complications, and the splint was shown to be superior in terms of family preferences," write the authors. "Inherent benefits of a pre-fabricated splint include easier hygiene, eliminating discomfort and anxiety associated with cast saw use, and easy application and removal. Thus, evidence from this research combined with the advantages of the splint advocate for this device in the treatment of these fracture cases."

Provided by Canadian Medical Association Journal

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