Management of a Colle's Fracture



- A Colle's fracture is a complete fracture of the distal radius that typically presents after a fall on an outstretched hand.
- They are common in elderly patients, particularly those with associated degenerative bone disease, such as osteoporosis.





Clinical Features

- Deformity typically described as "dinner fork"
- Pain
- Swelling on the dorsal surface of the wrist
- Bruising

Always assess distal neurological function (especially MEDIAN NERVE), and distal vasular function.

Management

- Ensure adequate analgesia
- Apply simple wrist splint, or plaster cast if young and/or very active
- Broad arm sling
- Patient NOT requiring manipulation should be referred to fracture clinic for follow up
- Surgery (if closed reduction fails)



IMPORTANT

Colle's fractures are manipulated to preserve function. The threshold for manipulation is patient dependent.

Patients who are unfit for GA can have their fracture manipulated under procedural sedation. All patients requiring manipulation should be referred to the on-call orthopaedic service.

Indications for Manipulation

- 1. Displacement of ulnar styloid.
- 2. Impaction resulting in radial styloid being less than 1cm distal to ulnar styloid.
- 3. Angulation where joint line tips backwards by greater than 10° (15° from normal position).
- 4. Distal neurological deficit on examination.





AP View – Impaction

Lateral View – Angulation

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