

# FINGER DISLOCATION

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## ■ ■ ■ Description

Finger dislocation is an injury to any finger joint so that adjoining bones are displaced from their normal position and no longer touch each other. Finger subluxation is less common; this is when the joint surfaces still touch but are not in normal relationship to each other. Fractures often accompany finger dislocations and subluxations, but ligament sprains must occur for these injuries to occur. Finger dislocations are a common problem for athletes.

## ■ ■ ■ Common Signs and Symptoms

- ?? Severe pain at the time of injury and when attempting to move the injured finger
- ?? Loss of function of the dislocated joint
- ?? Tenderness, obvious deformity, swelling, and bruising at the injury site
- ?? Numbness or paralysis below the dislocation from pinching, cutting, or pressure on the blood vessels or nerves (uncommon)

## ■ ■ ■ Causes

- ?? Direct or indirect blow, twisting injury, or landing on the hand, finger, or thumb
- ?? End result of a severe finger sprain or fracture
- ?? Congenital abnormality (you are born with it), such as a shallow or malformed joint surface

## ■ ■ ■ Risk Increases With

- ?? Participation in contact sports, especially baseball, football, basketball, and soccer
- ?? Previous finger or hand sprains or dislocations
- ?? Repeated injury to any joint in the hand
- ?? Poor conditioning of the hand (strength and flexibility)

## ■ ■ ■ Preventive Measures

- ?? Appropriately warm up and stretch before practice or competition.
- ?? Maintain appropriate conditioning, especially hand strength and flexibility.
- ?? To prevent recurrences, protect vulnerable joints after healing with protective devices or tape.

## ■ ■ ■ Expected Outcome

With appropriate reduction (repositioning of the joint), the hand or finger may require immobilization for 2 to 3 weeks. Complete healing of ligaments requires 6 weeks.

## ■ ■ ■ Possible Complications

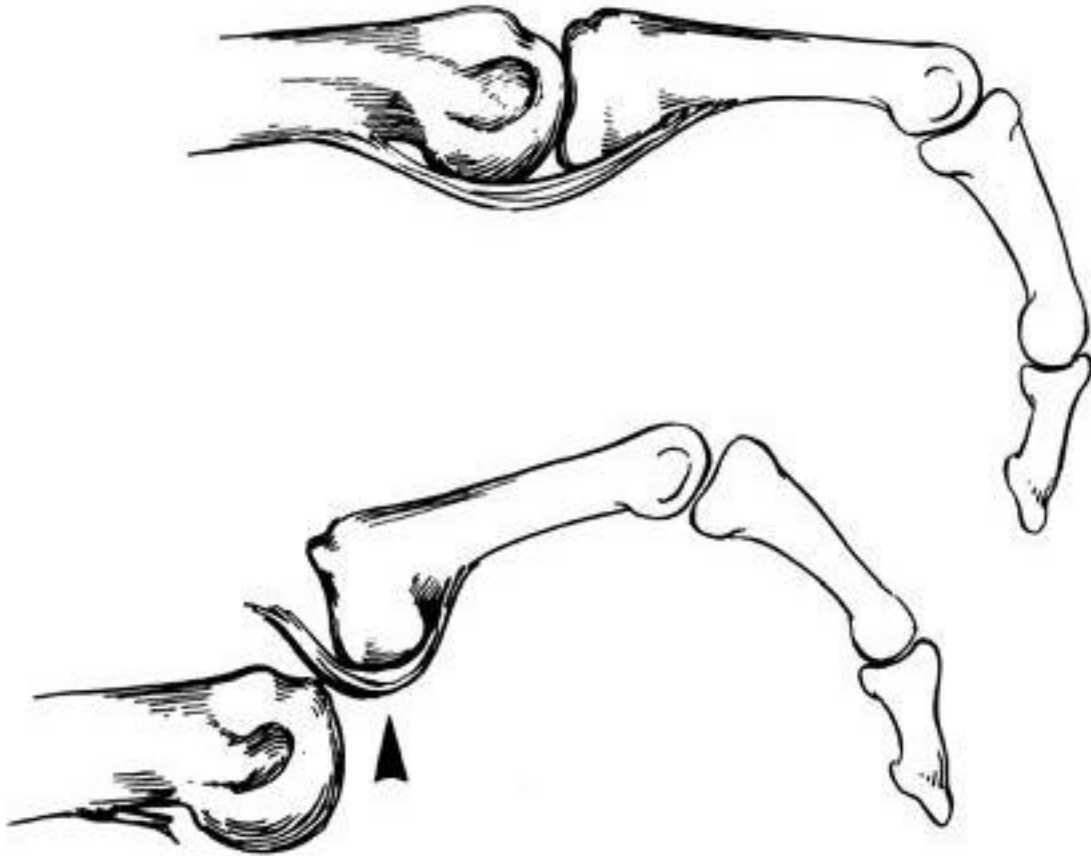
- ?? Damage to nearby nerves or major blood vessels, as well as associated fracture or joint cartilage injury due to the dislocation or reduction of the dislocation
- ?? Prolonged healing or recurrent dislocation if activity is resumed too soon
- ?? Recurrent dislocations
- ?? Stiffness or loss of motion of the injured joint
- ?? Excessive bleeding around the dislocation site
- ?? Unstable or arthritic joint following repeated injury, surgery, or delayed treatment

## ■ ■ ■ General Treatment Considerations

After immediate reduction (repositioning of the bones of the joint) by trained medical personnel, treatment usually consists of ice and medications to relieve pain. Although reduction can be performed without surgery, surgery is occasionally necessary to restore the joint to its normal position if a tendon, bone chips, or another structure prevents repositioning or to repair ligaments and tendons. Elevating the injured finger at or above heart level helps reduce swelling. Immobilization by splinting, casting, or bracing for 2 to 6 weeks is usually recommended to protect the joint while the ligaments heal. After immobilization, stretching and strengthening of the injured and weakened joint and surrounding muscles (due to the injury and the immobilization) are necessary. These may be done with or without the assistance of an occupational or physical therapist or athletic trainer. Use of taping may be recommended when returning to sports.

## ■ ■ ■ Medication

- ?? General anesthesia or muscle relaxants may be used to help make the joint repositioning possible.
- ?? Nonsteroidal anti-inflammatory medications, such as aspirin and ibuprofen (do not take within 7 days before surgery), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur.



**Figure 1**

From DeLee JC, Drez D Jr.: Orthopaedic Sports Medicine: Principles and Practice. Philadelphia, WB Saunders, 1994, p. 974.

?? Strong pain relievers may be prescribed as necessary. Use only as directed and only as much as you need.

### ■ ■ ■ Heat and Cold

- ?? Cold is used to relieve pain and reduce inflammation. Cold should be applied for 10 to 15 minutes every 2 to 3 hours for inflammation and pain. Use ice packs or an ice massage.
- ?? Heat may be used before performing stretching and strengthening activities prescribed by your physician, occupational or physical therapist, or athletic trainer. Use a heat pack or a warm soak.

■ ■ ■ **Notify a Physician If**

- ?? Pain, tenderness, or swelling worsens despite treatment
- ?? You experience pain, numbness, or coldness in the finger
- ?? Blue, gray, or dusky color appears in the fingernails
- ?? Any of the following occur after surgery:
  - Increased pain, swelling, redness, drainage, or bleeding in the surgical area
  - Signs of infection, including headache, muscle aches, dizziness, or a general ill feeling with fever
- ?? New, unexplained symptoms develop (drugs used in treatment may produce side effects)