

Treat Injured Hand, Finger, Elbow, and Arm Injuries with the Right Care

SURBHI PANCHAL, M.D.

"It's just a jammed finger"...or is it? "My wrist only acts up on the weekends"...but it's starting to affect my daily living activities. "

"These are common statements made by the weekend warrior," says Dr. Panchal of Lake Cook Orthopedic Associates (LCOA) that merged with Illinois Bone & Joint Institute (IBJI) last October. Weekend warriors are a unique population because they work hard during the week and play hard during the weekend. "Most important," she says, "is how to get back into the game."

A jammed finger can be as simple as a finger sprain, to as complex as an intra-articular phalanx fracture. A finger sprain can happen because of unusual placement of the finger when catching a ball or tackling a player. Initially, you will see some swelling and stiffness. A sure sign that there is a problem is when both continue to return and healing seems to be on hold.

Sometimes, while attempting to catch or hit a ball, the finger joints can be dislocated. These need to be reduced and then protected while getting the range of motion and stability back. This can mean a splint and often visits with the occupational therapist.

MORE COMPLEX INJURIES

The more complex injuries often include tendons and bones. Football and rugby can give patients jersey finger. Jersey finger is when the flexor tendon is pulled off the furthest part of the finger. Frequently, this is going to require surgery in order to put the tendon back where it needs to be and for the finger to have strength. Conversely when the extensor tendon is pulled off, that is called mallet finger. Dr. Panchal says, "This can be treated in an extension splint that is worn for some time even taking up to 8 weeks to heal. The finger can also be broken and can be treated anywhere from buddy taping to surgery. Finger and hand fractures can often be treated in splints and immobilization. Some fractures need percu-

taneous pinning (a reduction and an internal splint to hold the bone in the correct position while it heals. Finally, some fractures will need an incision and plates and screws. These need therapy afterward to control swelling, have the correct splint made, and regain the range of motion to get back to playing."

Wrist injuries are also common in weekend warriors. Stick handling in lacrosse and hockey to racquet sports can give athletes wrist pain. A sprain can be limiting due to the pain and the inability to rest the wrist in everyday life. A wrist brace can be used to immobilize the wrist and rest from sports can treat this condition. Dr. Panchal explains, "Tendinitis can occur and would require immobilization for resting the wrist. Cortisone injections are sometimes helpful. Another option is a wrist arthroscopy and debridement or repair if needed to minimize the inflamed tissue and repair the cartilage complex if damaged.

The scaphoid (one of the wrist bones) or the distal radius can be fractured when a hard fall on an outstretched hand is taken within a game. Some of the time this can be treated with a cast for 6-8 weeks, but frequently, surgery is needed to appropriate fixation." She emphasizes the importance of occupational therapy in recovery, because without it there would be stiffness and weakness in the affected area. She comments that without adequate therapy, returning to sporting activities to the fullest ability may be compromised.

Dr. Panchal concludes, "Weekend warriors can often be more challenging patients because they tend to want to speed up the recovery and get back to the activity. These patients require a tailored treatment plan. A strong doctor-patient relationship with open communication is the cornerstone to the healing process so that the patient can get back to the activity as quickly as possible without compromising recovery."



Dr. Surbhi Panchal specializes in disorders and treatment of the hand, wrist, elbow, and arm. She brings her education and expertise in hand and

upper extremity surgery to Lake Cook Orthopedics, a Division of Illinois Bone & Joint Institute. She completed the prestigious Cleveland Combined Hand Fellowship at the renowned Cleveland Clinic and MetroHealth Medical Center, the only adult Level I Trauma Center in Cleveland. Dr. Panchal is a member of the American Academy of Orthopedic Surgeons, the American Society for Surgery of the Hand, the Ruth Jackson Orthopedic Society, and the American Association for Hand Surgery. She has conducted research on surgical outcomes of upper extremity patients, has published in orthopedic peer-reviewed journals, and authored several chapters in medical texts on elbow and hand surgery. During her residency, Dr. Panchal participated in a mission to the Dominican Republic to provide free surgical care to local communities lacking access to general orthopedics and specialized upper extremity care.

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