Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Mallet Injuries

Version number: **3**
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Mallet Injuries

Patient Information

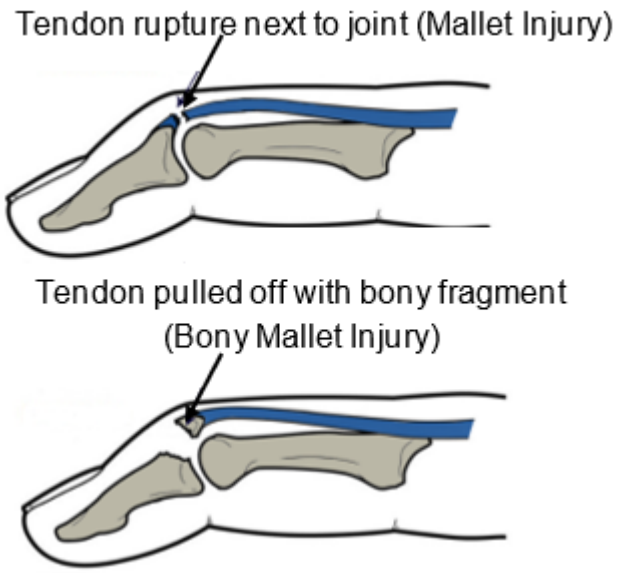
Hand Therapy

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Introduction

Mallet finger or mallet injury is a term used to describe an injury to the tip of a finger, or more uncommonly, the thumb. It usually occurs following a force or ‘stubbing’ to the tip of the digit, causing it to droop or lag.

Two types of mallet injury can occur:



1. A soft tissue mallet is caused by snapping the tendon that straightens the end of the digit.

2. A bony mallet is caused by a break / fracture of the portion of bone that the tendon is attached to.

Both types result in the fingertip drooping down, with an inability to straighten it up. To establish which injury you have, an x-ray will be taken.

In some bony mallet injuries, the portion of bone that fractures can be quite large. In some instances, this can cause the joint at the end of your finger to become unstable, though this is very uncommon. This type of mallet injury requires a review by a Consultant Hand Surgeon.

Treatment

Mallet fingers are treated using a splint.

This will be applied in the Urgent Treatment Centre (UTC) following your x-ray.

If you have a bony mallet injury, the splint should be worn for 6 weeks. If you have a soft tissue mallet injury, the splint should be worn for 8 weeks.

Whilst the tissue is healing, it is important that you wear the splint, which keeps the end joint of your finger straight at all times i.e. 24/7, allowing the tissue to heal.





If you are changing the tape, or removing the splint to check your skin, the fingertip must not be left to drop. If the end joint drops, the weak healing tissue may break, and your splintage will need to start again from day one.

The QR code will take you to a video that will show you how to do this safely.



Alternatively, you can visit this link https://vimeo.com/1106457729?share=copy#t=0

Virtual Fracture Clinic

Your X-rays and notes will be reviewed in the virtual fracture clinic (VFC) up to 48 hours after you have been to the UTC.

A member of the VFC team will contact you initially by phone for review. This may be converted to a video call at your convenience.

Your mallet injury type will be confirmed to you (bony or soft tissue).

If you require a Consultant appointment, this will be explained to you and arranged at this time.

If the splint is fitting well, the treatment regime will be discussed, and you will be provided with all the relevant information you need to self-manage your rehabilitation, including the contact details for the Hand Therapy Department, should you require guidance at any time.

When should I call for a review?

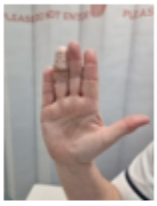
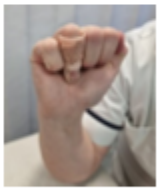
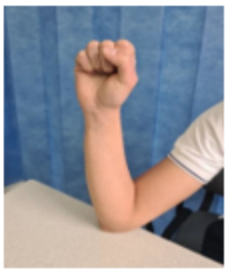
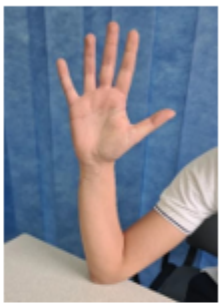
You should contact the Hand Therapy Team for a review if you notice any of the following:

- You develop a swan neck deformity that is not usual for your fingers. This is when the middle joint of you finger bends backwards further than usual (see picture)
- You are concerned about the condition of your skin
- Pain and swelling is getting significantly worse
- Your splint does not fit well; it may be too tight or too loose, or it may prevent the middle joint of your finger from bending
- You have any query regarding the length of time you need to stay in the splint, or if the splint has come off before the allotted 6 or 8 weeks
- If 2 weeks after starting the exercises and weaning from the splint, you are struggling to make a fist, or to get your fingertip to your palm
- Or after 12 weeks, you are struggling to return to your usual work or hobbies



Rehabilitation

The following table sets out week by week guidance for self-management of your mallet injury. After your telephone / video review, please tick the relevant box, and mark the date your splint was applied.

BONY MALLET ☐	SOFT TISSUE MALLET ☐	**Mallet Rehabilitation** **Date my splint went on:…….**	
Stage 1 **Week 0-6**	**Week 0-8**	Keep the splint on at all times. Make sure the fingertip is fully supported in the splint for the total number of weeks. Practice moving the unaffected finger joints with the splint on. Cover the splint for washing / showering etc. If required, remove the splint using the technique demonstrated at your virtual appointment.	 
Stage 2 **Week 6-8**	**Week 8-10**	Remove the splint; if there is no lag, or only a slight lag, you can begin to remove the splint for function and gentle movement exercises. Start with light function with little risk to stubbing the fingertip. For those riskier activities, wear the splint for the task and then remove afterwards. Practise simple finger bending / straightening exercises. There is no need to apply a stretch to the affected fingertip to make it bend more. This movement will return gradually. Continue to wear the splint at night. If, when you remove the splint, there is still a lag, continue to wear the splint full time for a further 2 weeks, then refer back to the beginning of stage 2.	 
Stage 3 **Week 8+**	**Week 10+**	Gradually increase the time spent out of the splint for lighter activities initially, progressing to full / normal activities at 12 weeks. Though you may have stopped wearing the splint during the day, continue to wear the splint at night until 12 weeks. At 12 weeks from when the splint was applied to your finger, you should have fully weaned from the splint and discarded it.	

Important

It is important to monitor the condition of your skin whilst wearing the splint. If you are concerned about the skin under the splint, then remove it as demonstrated to check it. If you are worried the splint is damaging your skin, you must contact the Hand Therapy Department on 01942 822595.

During stage 1, it is vital that, if you have removed the splint to check your skin, you do **not** bend the fingertip. This will disturb the weak healing tissue, and you will have to start the splint regime again from the beginning.

Expectations

Most injuries heal without any problems, although it may take several months to regain full function.

Short Term (0-12 weeks)

It is common to experience ongoing swelling and discomfort over the back of the finger joint initially. This can last for several weeks to months in some cases. You may also experience increased sensitivity over the back of the finger joint

Long Term (12 weeks+)

You may be left with a permanent small bump over the back of the finger joint. Your finger may not be completely straight following treatment, although considerably improved. Neither of these features should impact upon the ability to use your hand normally.

Reference

https://fifevirtualhandclinic.co.uk/

Acknowledgement

Thank you to NHS Scotland for allowing free access / use of their images.



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