Patient Information Leaflet

Excision of the Radial Head

Produced By: Orthopaedic Department

October 2013
Review due: October 2016
If you require this leaflet in another language, large print or another format, please contact the Quality Team, telephone 01983 534850, who will advise you.

What is an excision of the Radial head?

An operation for arthritis of the elbow or problems following a fracture. These notes give a guide to the stay in hospital. They also give an idea about what it will be like afterwards. If more information is required, please ask.

What is the problem?

The radial (ray-dee-al) head is the end of one of the bones at the elbow. It rotates as the hand is moved from being palm up, to being palm down. It forms part of the elbow joint. If arthritis develops in this joint the elbow may become painful, especially when the wrist is rotated.

What does the operation consist of?

The surgeon will make a cut on the outer side of the elbow and the radial head is then removed using a special bone saw. The skin wound is then closed with stitches.

Starving instructions

The instructions you will be given are dependent on which type of anaesthetic is to be used and also what time of day your operation is scheduled for.

Are there any alternatives?

If arthritis pain in the elbow is interfering with daily activities it is possible to have something done to try to reduce this pain. Non-operative treatment may not be very effective. Fortunately, the main part of the elbow joint is not affected and therefore a simple operative procedure of removal of the radial head is sufficient.

Physiotherapy

Whilst in bed, the ankles and legs should be moved to aid circulation. It is also important to ensure the fingers of the arm are actively moved. If your arm is in a plaster, this will be removed approximately two weeks after the operation. The physiotherapist will inform you which exercises to do once the plaster has been removed. The aim of physiotherapy is to try to regain joint mobility. Most of the elbow movement should be regained within a few weeks of the operation. However it may take you a few months to be able to fully straighten or bend the arm.

The wound and stitches

If your arm is not in a plaster cast, a simple adhesive dressing will cover the wound. If there is a drain in the wound, the nurses will remove it after 24 hours. The stitches may be removed by the practice nurse in the GP surgery or, if requested by the surgeon, a follow up appointment will be made and sent to you.

Washing

If the arm is in a plaster cast, it is important not to get the plaster wet. If there is only a dressing over the wound then the skin around the dressing may be washed. The sling may be removed to facilitate washing. The wound area may be washed as soon as the dressing has been removed. Soap and warm tap water are entirely adequate. A bath or shower may be taken as often as required.
What about informing my relatives and contacts?

With your permission, the nurses will keep your relatives and contacts up to date with your progress. However, please help minimise the number of phone calls to the ward. Organise a few key people who can ring and distribute information.

How long in hospital?

The operation is frequently done as a day case. You may need to stay one night at most. Your stitches will be removed by your GP’s nurse at 10 days.

Clothes

Please bring a loose fitting jumper or shirt to. This is because your arm will be in a sling and initially kept under your clothes.

Sick notes

Please ask the nurses for sick notes, certificates etc.

Driving

No driving is allowed whilst your arm is in a sling or cast. Arm movements may be restricted for several weeks once the sling has been removed; therefore it is still unsafe to drive.

Work

This depends on the type of job undertaken. If it is possible to work with one hand only then it may be possible to return to work two weeks after surgery. This also depends on the ability to get to work. If the employment is of the manual type then it is possible that this may not be possible for two to three months.

Sport

Most sport may be reintroduced at six weeks following surgery. When sport is first resumed it may not be possible to be as active as pre-operatively. The elbow may ache at the end of a game. It may take many months for the elbow to make a full recovery.

General recovery

The elbow should continue to improve for up to six months.

Complications

There is a slight risk of a wound infection. If pain arises from other parts of the elbow joint then some pain may persist following surgery. There is a nerve, which runs in front of the elbow, near to the operation site and occasionally the nerve is bruised during the operation. If this happens then the wrist may be affected temporarily. This should only persist for a few weeks. It is very rare for the nerve to be permanently damaged. If permanent nerve damage were to occur you would have residual weakness when straightening the wrist. The risk of this is under 1%.
Contact Details

Please contact your GP in the first instance.

Valuables should not be brought into the hospital. If patients have to bring in valuable items they should ask a nurse to store them safely and request a receipt for the items. You may not be able to have the valuable items returned if the time of discharge from hospital is out of hours.

We are sorry but the Trust cannot accept responsibility for loss or damage to items not given for safe keeping.

You can get further information on all sorts of health issues through NHS interactive available through Sky TV or online at: http://www.nhsdirect.nhs.uk/

For Health advice and out of hours GP service please call the NHS 111 service on: 111

We Value Your Views On Our Service

If you wish to comment on the care which you, your relative or friend has received, we will be pleased to hear from you. Please speak to the person in charge of the ward, clinic or service in the first instance or ask them to contact the Quality Team. If you wish to contact them directly, telephone on 534850.

Alternatively you may prefer to write to:

Chief Executive
Isle Of Wight NHS Trust
St Mary’s Hospital
Newport
Isle of Wight
PO30 5TG

You can also share any concerns you have about our services with the Care Quality Commission (CQC) on 03000 61 61 61 or at enquiries@cqc.org.uk

All NHS sites are no smoking areas.
If you would like help and advice to stop smoking please call: Freephone 0800 169 0 169 to talk to the NHS Smoking Helpline.

Ref: OTH/RH/5