

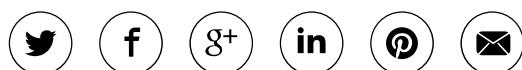
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Hand and Upper Limb Orthopedic Surgeon Dr. Alejandro Badia Discusses What It Means To 'Jam' a Finger; Offers Tips for Finger Injuries in General

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When It Comes to Ball Control, Avoid Giving It the Fingers

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When it comes to ball control in sports, avoid giving it the fingers. That's because a hard-thrown or hit ball in sports can "jam" a finger, causing a tendon injury known as mallet finger – sometimes called baseball or hammer finger. It occurs when an extended fingertip receives a sudden blow or is forcibly flexed, says noted hand and upper limb orthopedic surgeon [Dr. Alejandro Badia](#).

The trauma can rupture the soft-tissue extensor tendon, which runs along the backside of the finger (opposite the palm), or literally pull the tendon off the distal phalanx, the finger's farthest – and smallest – bone, leaving the fingertip in a noticeably drooped position, unable to be extended without help, says Dr. Badia, an expert in musculoskeletal disorders, especially of the hand and upper limbs. Tenderness and swelling are also likely to develop in and around the fingertip joint.

Should a finger get jammed, "do not pull on it, thinking it is just dislocated. You might only make the injury worse," Dr. Badia says.

A mallet injury in sports frequently affects the ring or small finger on the dominant hand. But Dr. Badia emphasizes mallet finger is not confined to athletics.

"The injury may occur if a finger is accidentally crushed in a closed drawer or door, for example, or the back of the fingertip is deeply cut while using tools or cooking knives," he states. "Older individuals,



Dr. Alejandro Badia

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especially women, can incur mallet finger when performing common household tasks like tucking a bedsheet under a mattress.”

More worrisome than the finger injury itself is the tendency of patients to dismiss the problem – and the pain – as simply a minor finger sprain and delay or not even seek medical treatment. “The problem is particularly prevalent in sports when players want to remain active and play through the pain,” says Dr. Badia, who is founder and chief medical officer of the Florida-based Badia Hand to Shoulder Center and OrthoNOW®.

“The term ‘jammed finger’ may not sound serious, but the injury can actually lead to long-term problems,” Dr. Badia says. “General urgent-care centers oftentimes use this term without distinguishing between occult fractures, ligament injuries, or tendon injuries, including mallet finger and boutonniere injuries.” Boutonniere refers to a deformity caused by a tendon injury to the middle finger joint.

“A significant digit injury should be seen by an orthopedist, preferably a hand specialist, within days,” Dr. Badia urges. An appointment is usually not required if a neighborhood orthopedic urgent care center, like OrthoNOW®, is available.

“Most importantly, avoid a hospital emergency department to treat hand or finger injuries. Besides being expensive and time-consuming, emergency departments may miss the problem or recommend incorrect treatment,” he advises.

Fingers consist of relatively complex systems, involving an interplay of bones; bone joints that act as hinges; ligaments – strong bands of tissue connecting the bones; and tendons, which are cords of collagen anchoring bones to muscle. The anatomy ensures motion, stability and hand strength, allowing the flexing and extension of fingers for maximum gripping and grasping.

“Untreated damage to any of these elements can lead to stiffness and permanent deformity of the fingertip, including development of a swan neck deformity, which causes the finger to bend in unusual ways,” Dr. Badia notes.

Mallet finger is most concerning in children and adolescents whose fingers are still in the process of growth and development. Injuries to their fingers can result in deformities and loss of function, Dr. Badia warns.

Most cases of mallet finger – those involving only soft-tissue injuries or small bone fractures - are treated conservatively by splinting the injured finger. Splints normally must be worn for approximately eight weeks, followed by night-time-only splinting for another four-to-six weeks. Patients engaged in sports or high-risk work activities may have to wear splints beyond the initial healing period, Dr. Badia says.

In limited instances, surgery is needed to repair a tendon and stabilize the fingertip’s bone structure and joint, especially if the mallet injury caused the tendon to pull away a large fragment (more than 30 percent) of bone when it was avulsed from the distal phalanx or if the injury has become chronic because it went untreated for too long.

“For large fractures, surgical approaches include stabilization of the extensor tendon and wire fixation of the distal interphalangeal joint (fingertip joint),” explains Dr. Badia. “In cases of chronic mallet finger, the surgeon may initially try splinting; otherwise, surgical repair or reconstruction of the extensor tendon is performed to improve joint extension and correct flexion deformity of the fingertip.”

Should mallet symptoms persist, the surgeon may employ a salvage procedure that involves use of wire, screws or pins to fix the interphalangeal joint in a slight flexion to enhance finger function and alleviate pain, Dr. Badia adds.

Meanwhile, Dr. Badia offers this advice for mallet finger and finger injuries in general:

Immediately apply ice to the injured, raise the hand so that fingers are above the heart and take over-the-counter non-steroidal anti-inflammatory medications for control of pain and swelling.

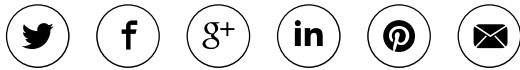
If finger pain persists more than a few days following injury, contact an orthopedic specialist for evaluation. Don't delay.

If splinting of the finger is recommended, be compliant and wear the splint. When removing the splint to wash or dry it, keep the injured finger on a flat surface to prevent bending the finger and re-injuring the tendon.

Perform suggested exercises to prevent the splinted finger's middle joint from stiffening.

Alejandro Badia, MD, FACS, internationally renowned hand and upper-limb surgeon and founder of Badia Hand to Shoulder Center and OrthoNOW®, a walk-in orthopedic care clinic. He is a member of the American Society for Surgery of the Hand, American Association for Hand Surgery and the American Academy of Orthopedic Surgeons and an honorary member of many international professional hand societies. Dr. Badia specializes in treating all problems related to the hand and upper extremities, including trauma, sports injury, joint reconstruction, nerve injuries and arthroscopic surgeries. Go to OrthoNOWcare.com and drbadia.com.

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