



Fracture (break) of the proximal (top end) humerus (arm bone) in children

This leaflet aims to answer some of the questions that you or your child may have about managing a humerus fracture.

Note to young people reading this leaflet: To make this leaflet easier to read we have addressed it to parents or carers; please excuse us for referring to you as 'your child'!

What is a proximal humerus fracture?

Your child has sustained a 'fracture' of their upper arm bone, which forms the shoulder joint with the shoulder blade. It is a fairly common break in children, caused by falling onto the arm, or shoulder. The good news is that all these fractures in children heal well with simple common sense advice and instructions.



What is the treatment?

The best way to treat the initial pain and discomfort is to place the injured arm in a 'collar and cuff' foam sling that allows the bruising and bone time to heal. The sling should be worn during the day for 3-4 weeks. At night you should place a soft pillow in between the arm and body for comfort.

You should give your child regular painkillers for the first few days and then as required.

When it is time to remove the sling:

- Make sure that your child is calm and that you are not rushed or distracted.
- Allow your child to gently and slowly move the arm.
- Once the sling comes off the arm should be pain-free, although it may be slightly stiff from being in a sling and your child may be a little unsure to start with.
- If the arm is still painful then replace the sling and contact us at the Orthopaedic Clinic 8.30am – 5.00pm Monday – Friday on **0118 322 8334**. If you feel more urgent attention is needed, then contact your GP or take your child to the Emergency Department (A&E).

Sporting activities, physical education and rough play should be avoided for another 3-4 weeks (total of 6-8 weeks from injury).

Things to be aware of early on in the treatment

Your child may have slight pain in their shoulder. This will settle within a few days. It may be helpful to ease your child's discomfort with simple painkillers such as paracetamol or ibuprofen. These should be used as directed on the packet or by your pharmacist. If your child's pain is not relieved despite these, or if the pain does not begin to improve after a week, then please seek medical advice.

There may also be mild swelling or a bump at the fracture site, but as the bone heals will become non tender and settle.

Frequently asked questions

Can the sling be removed during washing?

It is advisable not to remove the sling for the first 3-4 days unless you have a concern. After this the sling can be removed for washing and bath times as long as no direct pressure is placed through the arm. If your child feels any discomfort, replace the sling and try again in a day or two.

Can my child go back to school / playgroup with the sling on?

Yes, but do make sure that the school or playgroup are aware that the arm is injured so they take appropriate care.

Once the sling is off can they go back to all activities?

No. Climbing, swinging and high impact activities should be avoided for a further 3-4 weeks.

What should we do with the sling once it has been removed?

It is best to keep the sling safe for a few days to make sure there is no further need for it. After this, the sling can be thrown away.

What should I do if my child keeps removing the sling?

In the first 2-3 weeks we advise that the sling should be kept on. If after the second or third week your child keeps removing the sling and appears to be completely pain free and willing to use the arm and hand normally, leave the sling off and monitor them. It is more than likely that the fracture has healed sufficiently.

Contact us

If you have any further questions or concerns regarding this condition, please contact the Orthopaedic Clinic between 8.30am – 5.00pm Monday – Friday on 0118 322 8334 (except bank holidays).

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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