

Orthopaedic Connection

Orthopaedic Braces, Part 2

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Transforming patient information into patient understanding.

There are many reasons my patients might need to wear a brace. As I mentioned last week there are a huge number of problems for which a patient might need a brace.

Knee

- After injuring knee ligaments not requiring surgery.
- Following knee ligament repair such as ACL or medial collateral ligament.
- To stabilize a knee after a fracture that has begun to heal, i.e. after a cast has been removed.
- In certain types of arthritis to try to unload part of the painful joint.

Knee braces are typically used for 6 – 8 weeks or more, but it depends a lot on the condition for which it is used.

Wrist

- Carpal tunnel braces worn primarily at night.
- Brace to control thumb motion to relieve arthritis pain.
- Brace to stabilize wrist to allow tendinitis inflammation to heal.
- Brace to be worn for several weeks after a wrist fracture has started to heal.

The brace is usually semi rigid and has Velcro straps to secure it.

Elbow

- Padded sleeve type brace to relieve pressure on back of elbow for bursitis problem. Not rigid.
- Wrap around elastic Velcro brace worn for “tennis elbow”. Often needs to be worn combined with other treatment.

Shoulder

There are several, but the most common one is called “Universal sling and swathe” which has two parts to immobilize the entire arm.

It can be and often is used after fractures about the shoulder whether the fracture needed surgery or not. Often required for 4 – 6 weeks or more.

I use the same brace routinely after shoulder surgery to repair a torn rotator cuff. Four weeks would be average use.

Foot and Ankle

- Laced braces, semi rigid, used after ligament injuries. Often called air cast ankle brace.
- Ski boot appearing rigid brace used for fractures or serious ligament injuries. Called air cast walking brace. 2 kinds: a lower one that goes about 6 inches above the ankle and a longer one that goes below the knee. Time of use varies greatly from a few weeks to a few months.

Spine

This could be its own article but I'll be brief. There are all kinds of back supports from wrap around Velcro elastic ones to very rigid stabilizing braces.

- To support the spine after a vertebral compression fracture.
- Immobilize the spine after complicated back surgery often requiring metal implants.
- Corrective brace used in scoliosis patients.

All back braces are often used for several months, but there is an end point when motion needs to be started to restore strength.

Hip

One is called a Pavlik Harness to keep a dislocated hip in place in an infant. It may be needed for 6 – 8 months.

There is a rigid brace that can be used after a patient has had a dislocation of their total hip prosthesis. This is a very serious and discouraging problem for the patient. The brace may be needed for several months.

Almost all of the braces I use are temporary, but that can extend into months sometimes. Patients basically don't like braces as they are uncomfortable at times and of necessity restrictive. This has been an over view of the various types I use.

Gratiot County Herald Archive and Office Website

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It gives access to all Website articles, Your Orthopaedic Connection and every GCH article from most recent to the first. Full text! It covers everything I do in the office and hospital.

Good Health. Good life. All the best to you.

Dr. Haverbush