

Plaster cast

Cast room

Introduction

After visiting the cast room on the Accident and Emergency Department, you will have received either a plaster-cast or an synthetic-cast. This leaflet contains general information concerning the cast you have received and explains what you may, and may not do with either type of cast.

Worth knowing

A plaster cast can be made of different materials: synthetic or mineral plaster.

With a plaster cast an arm or leg is immobile and is better able to rest. When a bone is broken, the broken bones are held by the cast in an acceptable position to ensure appropriate bone healing.

Some important facts / tips regarding plaster-casts and synthetic-casts:

- Plaster-cast has a hardening time of 48 hours. For the first 24 hours the cast needs to be supported by either a cushion or a sling to ensure that no unwanted bumps or bends in the cast occur. If this happens you could have problems later.
- The cast may not get wet under any circumstances. The cast becomes soft when in contact with water and the underlying cotton layer takes a long time to dry. This combination means that the skin under the cast can stay wet / moist longer than normal, which can lead to skin problems. Protect the plaster / synthetic-cast while showering with either a plastic bag or special shower cover. You can place the cast inside a plastic bag and seal it off with tape or cling film in order to make it watertight. Shower covers are available to buy at the pharmacy, home care shop, or cast room. If the plaster does get wet, please contact the cast room so that the cast can be replaced.
- Do not use sharp objects such as a pen or knitting needle to satisfy any itching. This can cause accidental wounds which have a risk of becoming infected.
- Do not wear jewellery on the affected hand, arm or leg, as this could lead to impingement.

Swelling

After breaking a bone, or operation, swelling can occur within the first week. You can attempt to combat the swelling by:

- Wearing a sling during the day, and supporting your arm with a pillow during the night. Strive to have the wrist higher than your elbow.
- Keep your foot higher than your knee when sitting on a sofa, couch or chair. This can be helped with the use of cushions. During the night it is recommended to keep the foot end of the mattress higher than the head end. This can be achieved by placing cushions under the mattress.
- Don't sit directly in the sunshine.

Movement

During the treatment period, it is important that you continue to use the rest of body that is not immobilised in a cast. This way you continue to keep the blood in your body flowing sufficiently, your joints will remain smooth, and you will prevent muscle loss / deterioration.

Try doing the following exercises multiple times a day and repeat each activity a minimum of five times:

Arm exercises

- Make a fist, squeeze it tightly then open your hand as wide as possible.
- Raise your shoulders and move them forwards and then backwards.
- If possible, stretch and flex your elbow.

Leg exercises

- Bend your toes towards you, count to three, and then press them away from you for three seconds.
- Raise the leg in the cast in the air and count to three. Afterwards, lower it slowly to the ground.
- Extend and bend your knee that isn't in a cast

Walking

If you have a plaster cast and are not allowed to put any weight on your leg, you will need to use crutches. These crutches can be rented from the Accident and Emergency Department or bought from a home care shop. Instructions for walking with crutches can be obtained from the nurse at the Emergency Department or cast technician and, if necessary, from the physiotherapist of your choice.

Pain

Get in contact if (despite keeping your leg or arm raised) the following occurs:

- The nails of the affected limb become white or blue.
- The fingers or toes tingle (pins and needles), become numb, or begin to swell.
- You experience increasing levels of pain.
- You become unable to move your fingers or toes, whereby this normally would be possible.
- The cast hurts you or squeezes too tightly.
- The cast gets broken. If this is a walking cast, then if broken, you may no longer walk on it.
- There is an object stuck in the cast which shouldn't be there.

Removing the cast

If you have an appointment in the hospital for a cast removal, consider the following:

- If a leg cast is to be removed, take sturdy shoes and a pair of crutches with you.
- If an arm cast is to be removed, bring along the sling which you received at the first / previous appointment.

When the cast is removed, you may have a strange or stiff feeling in the limb. Your arm or leg could also swell after the cast is removed. This can be alleviated by elevating the leg or arm and, if necessary, by wearing a compression stocking given by the cast technician.

Important contact information

If you have any questions, or need to make an appointment, please contact:

During workdays Monday to Friday between 08:00 and 17:00:

- Cast room - Enschede, route C16, Telephone number (053) 487 33 20
- Cast room - Oldenzaal, route 165, Telephone number (0541) 57 40 16

If there are urgent questions or issues outside the normal workday hours then contact:

- Emergency clinic entrance, route via Beltstraat 70, Telephone (053) 487 33 33

To make a follow up appointment, please call with the relevant secretary:

- Surgery / Trauma surgery, route B11, Telephone (053) 487 34 40
- Orthopaedics, route C11, Telephone (053) 487 27 40

Will you be flying in an aeroplane during the cast immobilisation treatment period, then please contact the cast room and the relevant airline.

Finally

You are entitled to correct and complete information. Only when you have sufficient insight can you give well-considered consent for a certain treatment or a certain examination. If something is not entirely clear to you, ask your doctor, resident, nurse or cast-clinician for further explanation.