This information leaflet follows up your recent telephone conversation with the Fracture Care Team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (Bone Specialist) and Fracture Care Specialist.

You have sustained a fracture to the base of the 5th metatarsal of your foot, which is known as a Jones fracture. Please use the picture below to understand where this injury is. This normally takes approximately 6 weeks to unite (heal) although pain and swelling can be ongoing for 3-6 months. You will be in a cast and asked to keep your weight off the foot initially. The swelling is often worse at the end of the day and elevating it will help. Following fracture clinic review you may be provided with a boot instead of the cast and you will be advised on how much weight to put through the foot. The boot which you may have been given is for your comfort only and is not needed to aid fracture healing. Take pain killers as prescribed. If you are worried that you are unable to follow this rehabilitation plan, or have any questions, then please phone the Fracture Care Team for advice.

If you are experiencing pain or symptoms, other than at the site of the original injury or surrounding area, please get in touch using the telephone or e-mail details at the top of this leaflet.

You have also been referred to fracture clinic after your injury to check on your progress. They will offer on-going advice with regards to rehabilitation. They may require further x-rays and this will be decided by the consultant on the day. There is a small chance that the fracture does not heal naturally and surgery may need to be considered. This will be discussed in the consultation at your appointment.

If you have not received an appointment within one week of receipt of this leaflet please contact the Fracture Care Team on the details provided above.

Picture of injury:
Please follow the Management / Rehabilitation plan shown below:

<table>
<thead>
<tr>
<th>Weeks since injury</th>
<th>Rehabilitation plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>0- 6</td>
<td>While in the cast, keep your weight off the foot using the crutches. Once reviewed in clinic you may be changed into a black boot which you must wear all of the time when walking. Use the crutches to take some of the weight off your foot. It is ok to take the boot off at night and when resting at home. It is also important to perform the exercises below regularly to get the movement back.</td>
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<tr>
<td>6 -12</td>
<td>You have been reviewed in fracture clinic. If you have been advised that the fracture is united (healed), you can begin to resume normal activity but be guided by any pain you are experiencing. You should be able to carry out day to day activities. Arduous tasks, long walks etc., may still cause some discomfort and swelling.</td>
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Initial advice

Cold packs:
A cold pack (ice pack or frozen peas wrapped in a damp towel) can provide short term pain relief. Apply this to the sore area for up to 15 minutes, every few hours ensuring the ice is never in direct contact with the skin.

Rest and Elevation:
Try to rest the foot for the first 24-72 hours to allow the early stage of healing to begin. Raise your ankle above the level of your hips to reduce swelling. You can use pillows or a stool to keep your foot up.

Early movement and exercise:
Early movement of the ankle and foot is important to promote circulation and reduce the risk of developing a DVT (blood clot). Follow the exercises below without causing too much pain. This will ensure your ankle and foot do not become too stiff. These exercises will help the healing process.

Early weight bearing (putting weight through your injured foot) helps increase the speed of healing. Try to walk as normally as possible as this will help with your recovery.

Smoking cessation

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery from this injury.

For advice on smoking cessation and local support available, please refer to the following website: [http://smokefree.nhs.uk](http://smokefree.nhs.uk) or discuss this with your GP.
Initial exercises (3 - 4 times a day)

Ankle and foot range of movement exercises. Repeat these 10 times each.

1. Point your foot up and down within a comfortable range of movement.
2. Make circles with your foot in one direction and then change direction.
3. With your heels together, move your toes apart, as shown in the picture.

Sources of information
This information leaflet has been developed by the Fracture Care Team at Brighton and Sussex University Hospitals Fracture Care Team and adapted for use at East Sussex Healthcare NHS Trust.

Important information
This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments
We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: (01323) 417400 Ext: 5860 or by email at:  
esh-tr.patientexperience@nhs.net

Hand hygiene
The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats
If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: (01424) 755255 Ext: 2620
After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

Thank you to the Brighton and Sussex University Hospitals NHS Trust

The following clinicians have been consulted and agreed this patient information:
Mr Guy Selmon – Consultant Orthopaedic Surgeon
Mr Andrew Skyrme – Consultant Orthopaedic Surgeon
Mr Michael Dunning - Consultant Orthopaedic Surgeon
Mr Henry Willmott - Consultant Orthopaedic Surgeon
Mr Barry Rose - Consultant Orthopaedic Surgeon
Helen Harper-Smith – Professional Lead Physiotherapist
Hilary Kircher – Clinical / Operational Lead Outpatient Physiotherapist

The Clinical Specialty/Unit that have agreed this patient information leaflet:
Department of Trauma and Orthopaedics

Next review date: March 2020
Responsible clinician/author: Helen Harper-Smith / Kate Weatherly – Specialist Orthopaedic Physiotherapist

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