A pulled elbow is a common minor injury which affects children under the age of five years. It occurs when one of the forearm bones, called the radius, partially slips out of a ring shaped ligament at the elbow, which secures the radius to the bone next to it called the ulna. Medically this is known as a ‘radial head subluxation’.

What causes a pulled elbow?

A pulled elbow happens because young children’s joints are not completely developed and the ring shaped ligament is looser at this age. Usually the arm has been stretched or pulled forcefully along the direction of the length of the arm. This commonly done by:

- You and your child moving in opposite directions quickly whilst holding hands
- Lifting your child by one hand
- Pulling an arm through a sleeve whilst dressing

Any sudden pulling, stretching, jerking or swinging of the child’s hand or forearm may cause it to slip, and it may occasionally even occur after a fall or, in a smaller child, simply rolling over on the arm.

What are the symptoms?

Your child may initially cry, appear to be in pain and be unable to fully bend their elbow. There is sometimes a ‘crack’ or ‘popping’ sound heard. They will be reluctant to use their arm, which may hang loosely at their side. Often they are then not distressed unless you try to move the arm.

How is it diagnosed?

The story of how it occurred and an examination of your child’s arm will help us diagnose a pulled elbow. An X-ray is not normally necessary because the ligament will not show up, and when we examine your child we will be able to tell if there is a more serious injury or break to the arm.

How is it treated?

If your child seems to be in pain they should be given simple painkillers such as paracetamol or ibuprofen. Once the examination has shown no other injury your child’s arm will need to be moved in a particular way to manipulate the head of the radius bone back into the correct position.
Pulled Elbow Advice

How is it treated? (cont’d)
This is a quick and simple manoeuvre, but may cause a brief moment of discomfort. Often a click is felt as the bone slips back into position. Shortly after this your child should be able to start using their arm, especially if distracted by playing with a toy, but sometimes this can take a few hours or more. The longer the arm has been 'subluxed' the longer this is likely to take, but every child is different. We usually advise observation in Children’s A&E until your child has started to use their arm, but this decision will be discussed with you at the time, as some children are more likely to relax and start to use it once they have gone home. If the arm seems a little sore or swollen after it has been treated, you should give regular simple painkillers such as paracetamol or ibuprofen until they are using it normally.

What is the prognosis or expected outcome of treatment?
Your child is expected to make a full recovery within a few days. If the manipulation is immediately successful we will not arrange to see them again. If we think it is likely there might be another injury, or the treatment is not successful it is possible that an X-ray will be performed. If the X-ray is also normal the treatment will then be to rest your child’s arm in a sling for 2–3 days. The elbow usually gets better on it’s own with this treatment. If you have any concerns that your child’s arm has not recovered within 2–3 days you should either return to the A&E Department for a further examination or make an appointment to see your GP.

Are there any possible complications?
It is extremely rare for a pulled elbow to result in any long-term damage.

Prevention
To prevent this happening it is best to avoid swinging games and pulling or lifting your child up by the hand. Use the child’s upper arms or armpits to lift them. Remember to teach others (like grandparents and childcare workers) to do the same.

You can always ring NHS Direct for advice at anytime on 08454647

References: http://www.patient.co.uk/doctor/Radial-Head-Subluxation.htm
Last accessed Dec 2013