Scaphoid Fracture

The most common carpal fracture, and the one most often missed on the first X-ray

CLI

Clinical signs

fall on an outstretched hand · anatomical snuffbox tenderness · tubercle tenderness and pain on axial thumb compression

XR

X-ray

dedicated scaphoid series · a normal first X-ray does not rule it out

SUS

Suspicion with a normal X-ray

immobilize and repeat the X-ray after some days, or MRI (the most sensitive) or CT

VAS

Retrograde blood supply

blood enters at the distal pole: the more proximal the fracture, the higher the risk of nonunion and avascular necrosis

Most common site
The waist (middle third)

Proximal pole
Poor supply: more necrosis

Displaced or proximal
Usually surgery

Complications: nonunion, avascular necrosis of the proximal pole and, in the long term, carpal arthritis (SNAC wrist)