



Oxford University Hospitals
NHS Foundation Trust

Chest wall injury

Information for patients



This leaflet has been written to give you information about the injury to your chest wall, including:

- Fractured ribs
- Fractured sternum (breastbone)
- Chest wall bruising

Injuries to the chest can be very painful. Unlike other parts of the body it is difficult to rest, as you use it when you breathe, and it supports you when you sit up and lie down.

Pain is one of the main problems after chest injuries. The amount of pain you feel and how long it may last for will depend on the type of injury you have. As a rough guide, fractured ribs and sternums can take about 4 to 6 weeks to heal and it is common to feel some discomfort after this time. Bruising can take between 2 to 4 weeks to heal.

Complications

Taking deep breaths and coughing are important normal actions that our bodies do every day. They help us avoid developing chest infections.

If you have suffered a chest injury you may expect to have an increase in the amount of sputum (phlegm) you produce in the days following your injury.

Chest infections are one of the most common complications after suffering a chest injury. This is because it can be more painful to take a deep breath or cough, so it is harder to clear any sputum being produced. Combined with the fact you may not be moving around as much as usual, this can mean that you are more likely to develop a chest infection.

Other less common complications include:

- Pneumothorax (air in the space surrounding the lung which may cause shortness of breath, increasing chest pain, or pain that is not near the fracture).
- Haemothorax (blood in the space surrounding the lung can cause shortness of breath and pain in the lower chest).
- Surgical emphysema (air trapped under the skin can cause a bubbly swollen area on the chest wall and may be linked to a pneumothorax).
- Abdominal injuries (liver or spleen damage, which may cause pain in your abdomen or back).

Treatment

There are no specific treatments for rib or sternum fractures and chest wall bruising and it is not always necessary to have an X-ray. The most important thing you can do is to try and avoid developing a chest infection while your injury heals. There are things you can do when you have been discharged home from hospital to help prevent this from happening.

Do:

- Take regular pain relief – this will help you feel able to take deep breaths and cough.
- Keep mobile (e.g. walking) – this is the most effective way to help you deep breathe and clear any sputum. It is also good to take regular deep breaths when you are sitting up or moving around.
- Cough when you need to and support your chest when coughing – you can support the painful area with a pillow, towel, or your hand.
- If you smoke, seek help with stopping.
- Keep your shoulders and arms moving with light activities that you can manage without making the pain worse (unless you are told not to because of other injuries).
- Seek help from medical professionals if your symptoms get worse.

This advice is especially important if you are a smoker. Visit: www.stopforlifeoxon.org for help and support with giving up smoking or speak to your GP for advice.

Don't

- Stay lying down or still for long periods of time.
- Lift, pull, or push anything which makes the pain worse.

What to do if you feel unwell when you get home

Even after following the above advice, some people may still develop a chest infection or have other complications after being discharged home.

Please seek further medical advice from your GP if you experience any of the following:

- Your sputum changes to an unusual colour, such as green or brown.
- You become unwell with a temperature.
- You start coughing up blood.
- Pain lasts more than 6 weeks after your injury.

If you need to contact your GP outside of normal surgery hours, please call NHS 111 by dialling 111 free of charge from any landline or mobile.

If you experience any of the following symptoms, you should always dial 999 immediately:

- **Ongoing or worsening shortness of breath.**
- **Increasing chest pain.**
- **A new pain which is not near your initial injury.**

Returning to work

If your job involves a lot of manual handling or lifting, you may need to discuss with your employer whether you can do other duties while your injury heals.

If you have any concerns regarding your return to work, it may be helpful to talk with your GP.

Further advice

This leaflet is a general guide to chest wall injuries. If you have any further queries about your current injuries, please contact your GP.

If you have a general concern and need further advice, contact NHS 111 by dialling 111 free of charge from any landline or mobile.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
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