

Traction: Balanced

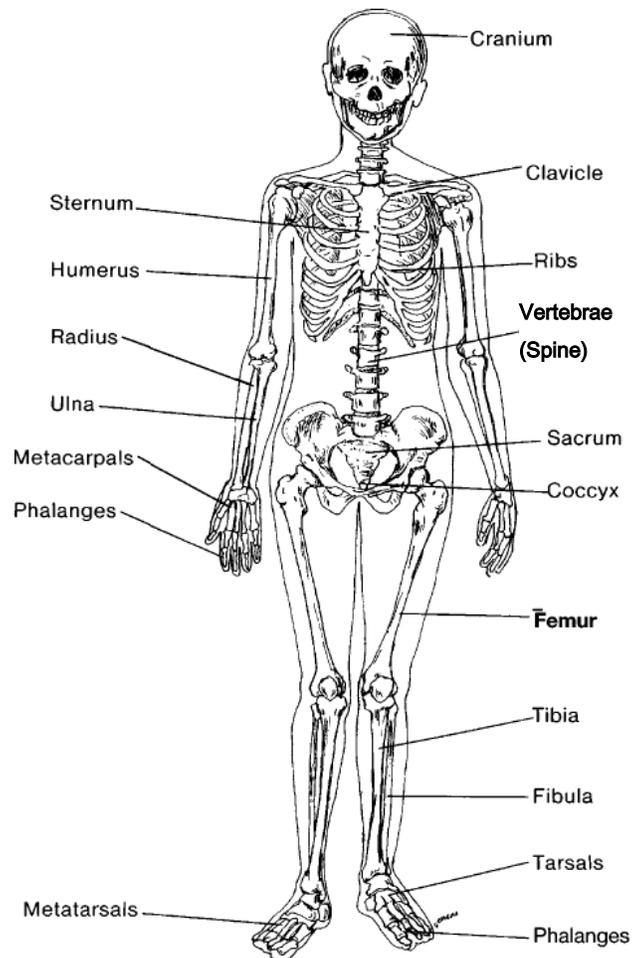
Your child is in balanced traction because his or her femur (FEE-mer) is broken. The femur is the long thigh bone between the hip and the knee (Picture 1). When this bone is broken, the parts of the bone must be held in the proper position for it to heal correctly.

Weights, ropes and pulleys are used to balance and hold the leg up for best healing. The equipment cradles the leg to help the child relax and feel more comfortable while the ends of the bones are healing together.

For some types of femur fractures, a pin is placed in the child's broken bone and the pin is connected to the weights. This is called “balanced skeletal traction.” The weights keep the parts of the bone in the proper place so the bone can heal well.

Your Child's Care While in Traction

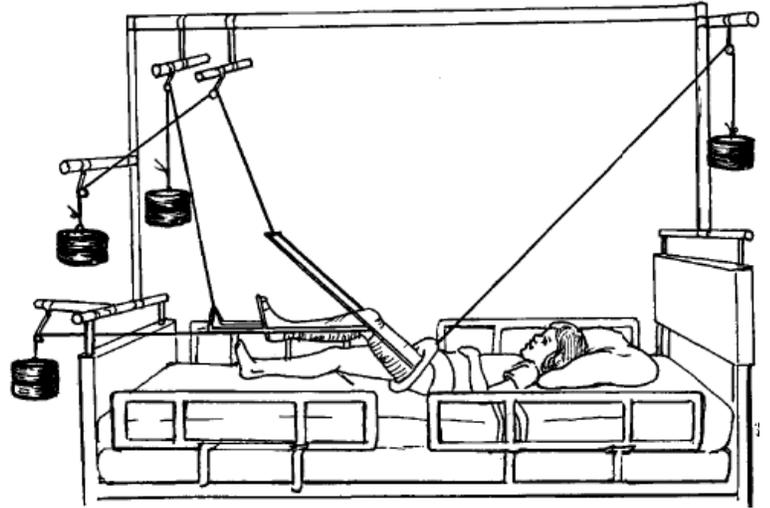
- Your child may be in traction from 3 to 4 weeks. This will depend on how fast the bone heals.
- Every 4 hours, the nurses will check your child's circulation and nerve function in the toes and foot. The nurse will check for temperature of the skin, swelling, pale or blue color to the skin, complaints of tingling or numbness and for movement.
- The nurses will also check the skin around the pin for these signs: redness, flaking and blisters. These are signs of skin breakdown and irritation.
- Your child will have an X-ray once a week so your doctor can see how the femur is healing and decide if the traction needs to be adjusted. If adjustments are made, more X-rays may be needed. This small number of X-rays is not harmful to your child.



Picture 1 The skeletal system inside the body.

Preventing Injury While Your Child Is in Traction

- Let the weights hang freely. Be sure the weights do not rest on anything.
- Keep all blankets and sheets away from the traction ropes.
- If your child has had a pin placed, try to keep him or her from moving around a lot in bed. This will help to keep the skin around the pin from tearing and becoming infected.
- Keep the side rails up and locked at all times so the child does not fall out of bed (Picture 2). You may put the side rails down if you stay right next to your child's bed and are able to watch your child carefully.



Picture 2 Balanced traction.

Activities in the Hospital

- We want you to take part in your child's care.
- Since your child must stay in bed, try to plan enjoyable activities. A VCR, tapes, books and other activities are available; just ask the nurse for these.
- Encourage family and friends to call or visit your child.
- The unit child life specialist will visit your child and help find activities to do in bed.
- During the school year, a teacher from the Columbus Public Schools will visit your child. The teacher will help your child keep up with his or her schoolwork.

Going Home

- A cast will be put on your child's body and leg before he or she goes home.
- You will be shown how to take care of your child's cast before you leave the hospital. Please refer to the Helping Hands: *Cast: Hip Spica or Body Cast*, HH-II-14, and *Circulation Checks*, HH-II-60.
- If your child will need special equipment such as a wheelchair or bed at home, we will help you arrange for these items before your child leaves the hospital.

If you have any questions, please ask your doctor or nurse.