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ANKLE ARTHROSCOPY AND LATERAL LIGAMENT RECONSTRUCTION

INTRODUCTION

Ankle arthroscopy and lateral ligament reconstruction is required for ankles that remain unstable despite appropriate physiotherapy. The surgery involves removing any loose cartilage and/or scar tissue from the ankle by arthroscopy (key hole surgery), and repairing the torn ligaments (anterior talo-fibular and calcaneo-fibular ligaments). The ligaments are attached to the fibula bone using two small suture anchors (screws).

THE SURGERY

Ankle arthroscopy and lateral ligament surgery involves a number of steps. These include:

- i. general anaesthetic, antibiotics
- ii. two small incisions (each 1 cm long) over the front of the ankle.
- iii. insertion of arthroscope
- iv. insertion of arthroscopic equipment including scissors, scrapers, shaver and burr
- v. Incision over outside of ankle (5 cm long)
- vi. Reconstruction of the lateral ligament with two suture anchors (small screws) inserted into fibula bone
- vii. wound closure with stiches/sutures
- viii. infiltration with local anaesthetic
- ix. back slab plaster

THE RISKS OF SURGERY

All surgical procedures carry some risk. The risk of complications with ankle arthroscopy and lateral ligament surgery is low. Some of the risks of surgery include:

- Infection
- Nerve injury – this may result in numbness, tingling and/or pins and needles on the top of the foot
- Deep venous thrombosis/pulmonary embolism. (The risk of DVT increases with smoking, the oral contraceptive pill and hormone replacement therapy immobility and obesity).
- Anaesthetic complications.
- Drug allergy.
- Post operative synovitis (inflammation of the lining of the joint), this usually settles with anti-inflammatory medications.
- Ongoing pain.
- Ongoing instability.

GUIDELINES FOR EXPECTED POST OPERATIVE RECOVERY

Keep foot elevated as much as possible, especially for initial 72 hours. Keep dressings dry and intact until post operative appointment.

Removal of stitches/sutures: 10-14 days.

Pain killers may be required for up to 2 weeks. Clexane injection (to prevent deep venous thrombosis): 10-14 days. Antibiotics for up to 2 weeks.

Protected weight bearing: 6 weeks

- 2 weeks touch weight bearing in back slab on crutches
- 4 weeks weight bearing as tolerated in Aircast walking boot
- The walking boot does not need to be worn in bed at night.

Commence ankle exercises: 2 weeks. Commence physiotherapy: 6 weeks

Return to non-weight bearing activities e.g. swimming: 2 weeks. Return to light jogging: 6-12 weeks. Return to most activities: 6-18 weeks. Full recovery: Up to 6 months.

Every patient's recovery is individual and depends on the severity of the injury and the complexity of the surgery.

ANY PROBLEMS

During office hours contact Dr Wines' office on (02) 9409 0500. After hours please contact the hospital where your surgery was performed.