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ANKLE REPLACEMENT

INTRODUCTION

Like all joints the ankle can be affected by arthritis. With the passage of time, arthritis leads to increasing pain, swelling and stiffness resulting in an ankle that does not function well. Ankle replacement surgery is an effective way to decrease pain of ankle arthritis, while maintaining some range of motion of the ankle. The ankle replacement is made up of two pieces of metal (made of a cobalt chromium alloy) that resurface the tibia and talus bones. In between the metal is a polyethylene (plastic) insert.

THE SURGERY

There are a number of steps involved in ankle replacement surgery. These include:

- i. nerve block, general anaesthetic, intravenous antibiotics
- ii. a 15 cm long incision over front of ankle
- iii. removal of bone from tibia and talus
- iv. insertion of metal tibial and talar components
- v. insertion of polyethylene insert
- vi. check x-rays
- vii. wound closure with stitches/sutures
- viii. plaster back slab

THE RISKS OF SURGERY

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

- Infection
- Problems with wound healing
- Nerve injury – this may result in numbness, tingling and/or pins and needles at 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
- Ongoing pain
- Component failure
- Requirement for revision surgery

GUIDELINES FOR EXPECTED POST OPERATIVE RECOVERY

Keep dressings dry and intact until post operative appointment.

Removal of stitches/sutures: 10-14 days.

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

Post operative mobilisation:

- First 2 weeks touch weight bearing in back slab.
- Next 4 weeks partial weight bearing in Aircast walking boot.
- Next 6 weeks weight bearing as tolerated in Aircast walking boot if necessary.
- Commence gentle physiotherapy: 2 weeks.

Return to most activities: Within 6 months. Full recovery: Up to 12 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.