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**Foot, Ankle and Trauma Surgery**

**PERONEAL REPAIR/TRANSFER AND CALCANEAL OSTEOTOMY**

**INTRODUCTION**

Peroneal repair/transfer and calcaneal osteotomy surgery aims to realign the heel and improve the function of the peroneal tendon with repair and/ or transfer techniques.

Tendon transfers involve releasing one end of a tendon and reattaching it to another tendon

**SURGERY**

Peroneal repair/transfer and calcaneal osteotomy surgery has a number of steps. These include:

- i. general anaesthetic, intravenous antibiotics.
- ii. incision along the outside of the foot.
- iii. realign the heel bone with a screw (calcaneal osteotomy).
- iv. exposure and identification of the tendons.
- v. repair and transfer of the tendons.
- vi. closure of tendon sheath.
- vii. closure of wound with stitches/sutures.
- viii. infiltration of local anaesthetic.
- ix. application of plaster back slab.

**RISKS OF SURGERY**

All surgical procedures carry some risk. The risks of complications with peroneal repair/ transfer and calcaneal osteotomy surgery are low. Some of the risks include:

- Infection
- Problems with wound healing
- Stiffness
- Nerve injury causing numbness, tingling and/or pins and needles.
- 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

**GUIDELINES FOR EXPECTED POST OPERATIVE RECOVERY**

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

Removal of stitches/sutures at the first post operative appointment, at 10-14 days.

Pain killers may be required for up to 6 weeks. Antibiotics for up to 2 weeks. Clexane injections (to reduce the risk of deep venous thrombosis): 10-14 days.

**Weight bearing:**

Crutches will be required post operatively.

- 10-14 days in plaster back slab, touch weight bearing
- 4 weeks in Aircast walking boot with weight bearing as tolerated
- A plaster or boot needs to be worn in bed for the first 6 weeks.

Commence physiotherapy: 6 weeks. Return to most activities: 4-6 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.