

Ankle/ Hindfoot Fusion Surgery

What is ankle/ hindfoot arthritis and what are the management options?

Osteoarthritis occurs when the cartilage lining a joint wears down causing severe pain. The treatment options in ankle joint or other hindfoot joints include Painkillers / steroid injections / Braces / fusion surgery (Ankle replacement may be an option in ankle arthritis depending on degree of arthritis, your age and activity level).

Pain in the hindfoot (below the ankle joint) is sometimes due to osteoarthritis in the Subtalar, Talonavicular and Calcaneocuboid joints. These are also known as triple joints.

The commonest causes of arthritis in these joints are altered foot biomechanics, previous injury, Rheumatoid arthritis or neuroarthropathy such as diabetes and neurological disorders. One, two or all of the triple joints may be affected.

What are the symptoms?

Most people with hindfoot arthritis complain of one or more of the following:

- Pain in the back of the foot and the ankle or sides
- Swelling
- Difficulty with footwear.
- Deformity of the foot and ankle
- Pain while weight bearing

What treatments are available?

Initial management of arthritis footwear modifications or insoles. Steroid injections may control symptoms to an extent. If these measures fail or if the pain is severe then surgery may be necessary. The surgery now can be offered with key hole procedures and minimally invasive techniques.

What does the operation involve?

The operation is carried out under general anaesthesia. Depending on the joints operated upon, incisions are made on the foot, remaining cartilage from the affected joints are removed, and then compressed together with metal screws, staples, plates or nail. For ankle joint keyhole technique may be used if appropriate.

Is it painful?

Whilst you are in hospital the nursing staff will give you pain killers as required and prescribed. We use a technique called an ankle block for pain relief. When you are at home you may find Paracetamol or Ibuprofen (if tolerated) useful for controlling any pain. Instructions on management of pain will be given by the nursing staff before you leave the hospital.

How long does recovery take? / What happens after surgery?

Most patients remain in hospital for either overnight or one day after the operation. You will have a temporary cast below the knee called a back slab, and will be required to nonweight bear with crutches initially. Your temporary cast and wound dressings will be changed and stitches removed (if applicable) during your followup appointment at 2 weeks.

Swelling is quite common after foot and ankle surgery and this is best managed by elevating the foot at regular intervals. At 2 weeks, you will be placed in a definitive belowknee cast, but will not be allowed to weightbear at that stage (except in case of internal nails). After 6 weeks, you will usually be allowed “protected weightbearing” in a removable walkerboot depending on progress. Unprotected weight bearing is usually allowed after 12 weeks only. Usually the physiotherapy begins at this stage.

Patients having had the left foot operated on will be able to drive an automatic car within 23 weeks (short distances only to avoid swelling). Those who have had an operation on the right side will be able to drive only after about 12 weeks. You are advised not to fly after surgery for at least six weeks.

If you have a desk job and are able to get to work, you should be able to return back to work with your foot up in the boot or plaster after 24 weeks. Otherwise you will need at least 12 weeks off work (depending on the type of surgery as well).

Golf, walking and even running short distances are all possible after a successful fusion surgery but takes time. It is not advisable to return into contact sport after these surgeries unless advised.

Please follow “Precautions following Surgery” as mentioned elsewhere on this website.

What can go wrong?

All operations have an inbuilt risk and complication rate. The risks for ankle or hindfoot fusion are as follows:

- Infection
- Prolonged swelling & stiffness
- Nerve or blood vessel injury
- Deep vein thrombosis (blood clot in leg vein)
- Delayed union or Nonunion (failure to fuse)
- Malunion (fuses in an imperfect foot position)
- Ongoing pain, Non Union and delayed union
- Risk of Arthritis in nearby joints

The above complications are rare but can occur.