

## **Patient information Leaflet**

### **Ankle Replacement**

#### **What is ankle arthritis and what are the options?**

Osteoarthritis occurs when the cartilage lining the ankle joint wears down causing severe pain. The treatment options include Painkillers / steroid injections / Braces / Ankle fusion or ankle replacement surgery.

#### **Why is ankle replacement performed?**

Ankle replacement is done to remove the painful arthritic ankle joint and replace with an implant (prosthesis). This has been used successfully in hip and knee joints for well over 30 years. Ankle replacements are gaining good results in the last few years.

The main reason for undergoing Ankle replacement is pain. Excellent relief of pain can be expected and some movement is preserved at the joint. This means that Ankle replacement offers an exciting alternative to ankle fusion for severe ankle arthritis. However it is never a guarantee that a range of movement will return to normal.

Nevertheless, we are cautious in offering this operation. It is not successful when there is any more than minor deformity, and is not possible when there is previous infection, neuromuscular disease or skin problems. About 1 in 5 ankle replacements wear out or loosen before 10 years. When this happens, they may have to be converted to a fusion. For these reasons, Ankle replacement has to be weighed up against fusion for each individual, and this will be discussed at your appointment with surgeon.

#### **What happens during my stay in hospital?**

The surgery is undertaken with special precautions to avoid infection, wound healing problems and deep vein thrombosis. The operation is usually performed under general anaesthetic, usually with a nerve block for pain relief, and an expected 3- 4 days stay in hospital. An incision is made over the front of the ankle, through which all the surgery is performed. A temporary plaster cast is applied at the end of the operation.

#### **What about pain?**

Whilst you are in hospital you will be monitored and the medical staff will give you painkillers as required. You will be prescribed painkillers on discharge as well.

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

You will be encouraged to walk with the help of physiotherapists as soon as possible after surgery with crutches or a walking frame. If the X-rays are satisfactory you may be put into a weight bearing plaster cast before discharge.

Swelling is quite common after foot and ankle surgery and this is best managed by elevating the foot at regular intervals for first 3-4 weeks. You are advised to elevate the operated foot/ankle on a pillow every night and during the day as often as you can for at least one hour each time. The above measures will help to reduce swelling of the ankle.

Your wound dressing will be changed and staples removed in the clinic during your follow up appointment, which is usually 10-14 days after the operation. A walker boot is usually used until 6 weeks post-operatively.

You are advised not to fly after surgery for about 6 weeks. Driving is not permitted until at least 6-8 weeks. You may return to an office-type job at 4-6 weeks, but if prolonged standing is required, 2-3 months' leave may be required.

## **What can go wrong?**

All operative interventions have an inbuilt risk and complication rate.

The risks following Ankle replacement include:

- Infection (in the wound or the joint replacement itself).
- Wound healing problems (if serious may require plastic surgery).
- Excessive bleeding / blood vessel damage.
- Injury to a nerve.
- Deep vein thrombosis (clot in a vein).
- Pulmonary embolus (clot in the lungs).
- Stiffness (inadequate range of movement).
- Residual pain.
- Collapse / deformity of the foot.
- Loosening or wear requiring revision surgery.

The above complications are rare but can occur.

[www.nefaas.co.uk](http://www.nefaas.co.uk)