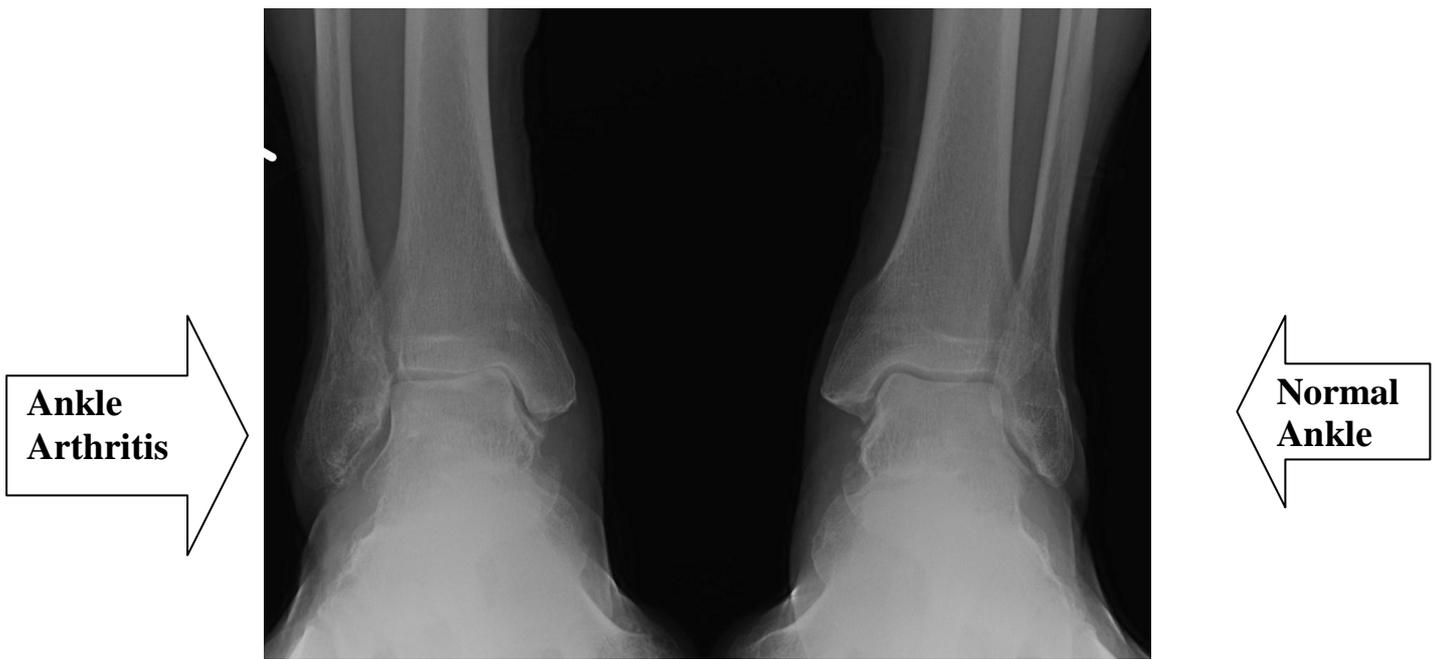


Ankle Replacement

What is ankle arthritis?

Arthritis is a condition where a joint loses its protective layer (cartilage). As a result the bone surfaces rub each other which cause pain. Arthritis of ankle joint is usually due to previous injury or rheumatoid arthritis.



What is an ankle replacement?

An ankle replacement is an operation like hip or knee replacement in which the diseased joint cartilage is replaced by metallic surface on both sides with special plastic (polyethylene) in middle. It is designed to preserve the movements of the ankle joint.



Who needs ankle replacement?

It is recommended for patients that have severe ankle pain due to arthritis, which is affecting the quality of their life and causing significant impairment of normal day to day activities. However, an ankle replacement would fail with time (currently 8-10 years) and therefore it is not recommended for young and active patients. An ankle replacement is likely to fail early if there is significant deformity. Therefore these patients are best suited for ankle fusion rather than replacement.

What happens in the hospital?

Most people come in the hospital on the day of surgery. Most patients have a general anaesthetic and nerve block to keep them comfortable and pain free after the operation. The operated leg is in a temporary plaster (below knee slab). You will be given antibiotic through vein to reduce chances of infection and injection to prevent the clot (deep vein thrombosis). The day after surgery, the physiotherapist will help you to mobilise non weight bearing using crutches. Most patients leave hospital within 1-2 days of surgery.

What happens when I leave hospital?

You can mobilise indoors with crutches. You will need to strictly elevate the leg at home for the first 2 weeks to reduce swelling. You will be seen at about 2 weeks after surgery to check wounds and change the plaster. You are then seen at 6 weeks with X-rays. At 6 weeks the plaster would be removed and you would be referred to physiotherapy.

What is the recovery period?

You can not drive until you are out of your plaster (6 weeks). Gradually the pain will improve and the leg will become stronger. You will need to do exercises to improve movements and strength. Most of the pain from ankle is likely to improve. There might be some residual pain due to arthritis of neighbouring joints.

What are the risks?

Smoking can significantly increase the risk of complications. It is strongly advised to try and stop smoking.

- Wound problems & Infection: The incidence is 1-2 %.
- Failure due to loosening of ankle joint
- Technical complications such as intra-operative fracture or mal positioning of components
- Clot (DVT) or Pulmonary embolism
- Damage to nerve or vessel.
- Pain
- Swelling
- Stiffness