North Cheshire and Mersey
NHS Foundation Trust

Ankle fusion (tibiotalar fusion)

Trauma and Orthopaedics

Information for patients and carers

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Caring for you

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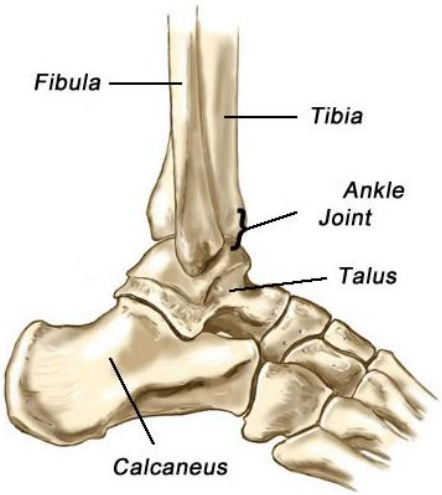
What is an ankle fusion?



Your ankle joint is made up of 3 bones:

- tibia (shin bone)
- fibula (small bone at the side)
- talus (foot bone)

An ankle fusion is an operation that permanently joins the tibia and talus bones together. This makes the ankle joint stiff and stops it moving up and down.

The operation can be done on its own or at the same time as other foot joint fusions.

Why do I need this operation?

The main reason the operation is performed is due to arthritis, which causes pain and stiffness. Arthritis wears away the soft protective layer (cartilage) at the end of the bones. This can happen through:

- wear and tear of the joint
- conditions such as rheumatoid arthritis
- fractures

When the joints are removed and the bones are fused together, there is no more movement of the ankle. This improves pain and helps to make the ankle more stable.

How is a diagnosis made?

A foot and ankle specialist will examine and take X-rays of your ankle.

Sometimes a steroid injection will be offered to see if fusion will help, and if other joints in your foot need to be fused. Other treatment options will be discussed with you at this stage.

Alternative treatments

Non-surgical treatment is often tried first, if suitable. This depends on:

- how bad the pain and stiffness in your foot is
- other medical conditions you may have, such as diabetes or circulation problems

Alternative treatments may include:

- painkillers

- steroid injections
- insoles, provided by an orthotist
- supportive shoes or calipers

If these treatment options do not help, then a fusion may be offered.

What does the operation involve?

The operation is usually done under general anaesthetic (a combination of medicines that brings on a sleep-like state). A local anaesthetic will also help to control your pain after surgery.

Most ankle fusions are done using keyhole surgery (arthroscopic technique). This means:

- 2 small cuts are made at the ankle
- special tools and a camera are used for the operation
- the joint surfaces are removed to create the edges of the 2 bones
- the edges are held together and positioned carefully
- screws are used to permanently hold the bones, allowing the bones to heal and fuse together

If your ankle is deformed, it may need to be opened with a larger cut.

What are the risks?

Foot surgery has some general risks, including:

- infection
- scarring
- swelling
- numbness
- blood clots

The main risk is that the bones do not fully fuse together. This risk is increased if you:

- have diabetes
- have rheumatoid arthritis
- smoke

It is important to stop smoking before the operation and during recovery.

You will be given medication to lower your risk of developing blood clots while your leg is in a plaster cast.

What happens after the operation?

After the operation, your ankle will be covered by a dry dressing, a plaster of paris (POP) backslap and bandage.

Keep the dressing clean, dry and in place until you are seen in clinic, about 2 weeks after your operation. Your dressing and stitches will be removed at this appointment. You will then have a full below knee plaster cast applied. You will be non-weight bearing on your ankle for another 4 weeks.

After 6 weeks, you will move into a boot and will be able to place a small amount of weight on your leg for another 6 weeks. It is important to keep your foot raised above the level of your heart to control the swelling.

After 12 weeks, you will be able to slowly increase how much weight you put through your leg.

Will I be able to walk and wear normal shoes?

You will likely be able to move and walk more than you could before the operation.

Your ankle joint would have been stiff and painful before the operation. After the operation, although your ankle will stay stiff, you should be pain free.

Once your foot has fully healed and the bones have fused, you will be able to wear normal shoes. It is recommended that you wear stiff-soled shoes for support.

Further information

Please let staff know of any concerns or questions you may have. We will do our best to answer your queries quickly.