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Adult and Paediatric Orthopaedic Surgeon Specialising in the Foot and Ankle

Ankle Ligament Reconstruction

INTRODUCTION

Ankle ligament reconstruction is performed in active people with recurrent ankle instability, to allow them to return to their active lifestyle, and secondarily to prevent osteoarthritis in the future.

The results of ankle ligament reconstruction are excellent, with an exceptionally low rate of recurrence of ankle instability.

THE PROCEDURE

There are a number of steps to be operation:

- 1. General anaesthetic
- 2. Ankle arthroscopy comprehensive examination of interior of ankle
- 3. Lateral incision
- 4. Ligament reconstruction with the help of suture anchors, and closure of the extensor retinaculum over the top, plus or minus an internal brace in heavier people or those with ligamentous laxity
- 5. Plaster backslab

RISKS & COMPLICATIONS

Every surgical procedure carries some risk. These risks are largely uncommon and many are rare.

They include:

Anaesthetic complications

Drug reactions

Wound infection

Deep Vein Thrombosis (DVT)/Pulmonary embolism (PE)

Sensory nerve injury resulting in numbness/tingling/pins and needles over top of foot Small artery or tendon injury (both very rare)

Recurrence of Instability (10%)



POST OPERATIVE PROTOCOL

1 night in hospital for observation, and physiotherapy assessment
Xarelto (bloodthinner) is used for first 2 weeks to prevent DVT
Weeks 0 - 2: non-weight-bearing in plaster backslab, anticoagulation
End of Week 2: Wound check, transition into a boot, commence partial weight-bearing
progressing to full weight bearing as pain allows, remove crutches when fully weight-bearing
Week 6: Out of boot into normal shoes, physiotherapy commences consisting of a graded,
functional training program for the foot and ankle
Week 12 to 16: Return to play/sport

PROBLEMS AND CONCERNS

If you have any queries or concerns, contact Dr. Ling's rooms on 9650 4782 between business hours. After hours or on weekends, if your matter is urgent, please present to the Emergency Department at Prince of Wales Hospital if you are an adult, or Sydney Children's Hospital if the patient is your child, and you will be seen by the Orthopaedic Registrar on call, who will contact Dr Ling directly