

DR JEFF LING MBBS BSc (Med) FRACS (Orth)

Adult and Paediatric Orthopaedic Surgeon Specialising in the Foot and Ankle

Tarsal coalitions

INTRODUCTION

A tarsal coalition is an extra connection between two bones in the foot. The most common extra connections are between the talus and calcaneus bones (talocalcaneal coalition) and between the calcaneus and the navicular bones (calcaneonavicular coalition). In some cases the extra bony connections results in abnormal biomechanics of the hindfoot resulting in pain. If the connection is found before the development of osteoarthritis, the extra bone can be removed, resulting in significant symptomatic improvement. Sometimes the coalition results in a painful flatfoot and the flatfoot needs to be reconstructed either with or without removal of the coalition.

THE PROCEDURE

There are a number of steps to the operation:

- 1. General anaesthetic and intravenous antibiotics.
- 2. Incision over extra bone.
- 3. Removal of extra bone.

4. Reconstruction of flatfoot if this is a problem (talocalcaneal coalitions only) - Lateral column lengthening, cuneiform osteotomy, Achilles lengthening

- 5. Check x ray
- 6. Closure of wound with stitches.
- 7. Infiltration with local anaesthetic.
- 8. Plaster backslab

RISKS & COMPLICATIONS

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

They include: Anaesthetic complications Wound infection Deep Vein Thrombosis (DVT)/Pulmonary embolism (PE) Small sensory nerve injury Ongoing pain and stiffness

POST OPERATIVE PROTOCOL

Patients will stay 1 to 2 nights in hospital for observation and physiotherapy assessment Weeks o - 2: non-weight-bearing in plaster backslab



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 Transition into cast and remain non-weight-bearing if associated with a flatfoot reconstruction Week 6: wean boot, physiotherapy commences cast is removed and commencement of weight-bearing in a boot if associated flatfoot reconstruction Week 12: most activities can resume

wean boot in the setting of flatfoot reconstruction

Full recovery: 3 - 4 months

6 to 8 months if associated flatfoot reconstruction

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