Orthopaedic Connection

Ankle Fusion or Replacement

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Transforming patient information into patient understanding.

End stage surgical treatment of ankle arthritis comes down to two choices. There are really few problems that Orthopaedic Surgeons treat that are so clear. Ankle fusion vs. Ankle replacement are the two procedures that can be done when all the other forms of treatment or surgery have failed.

Ankle Fusion (Arthrodesis)

The operation that makes the ankle joint solid is called fusion or arthrodesis. I’m not sure when Orthopaedic Surgeons first started doing it for painful arthritis, but it has to be at least 100 years ago or longer. It is done for a painful arthritic ankle.

The two bones of the ankle are joined surgically at about a 90 degree angle. I don’t want to get too technical about how we get the bones to join or grow together, but metal screws, plate, etc. are typically used.

The joint no longer moves but the pain is gone which is the goal of the surgery. I would usually put such a patient in a cast for about 6 weeks as the bones fuse or grow together. A brace follows the cast.

Surgery takes about 2 hours and you go home the next day.

A shoe with a somewhat rounded sole can be helpful to reduce limping, which almost always results to some degree after an ankle fusion.

However, if a patient can walk without the constant arthritis pain they had before the surgery most patients would say that a limp is not a bad trade off. I have always made it crystal clear to the patient and family that a limp to some extent will result from an ankle fusion. The patient has a very good chance that the pain will be gone when the ankle heals.

Total Ankle Replacement

A total ankle replacement is going in the opposite direction of a ankle fusion.

The idea of ankle replacement or arthroplasty as it is called is to maintain some range of movement at the ankle. This results in the possibility of less stress on adjacent joints. Ankle fusion (arthrodesis) can be done on almost all patients if they understand and accept the possible limping aspect.

Ankle Replacement patients need to meet certain criteria.

- Middle age or older patient
- Healthy bone around the ankle for the prosthetic components to attach to bone
- No history of infection
- Stable ligaments
- Normal nerve and muscle function in lower leg and foot.

Structure

A metal implant covers the bone on the upper and lower joint surface. A spacer of polyethylene plastic separates the metal surfaces.

After Surgery

- No weight to minimum weight for 6 weeks in a cast
- Then 6 weeks in a walking brace (boot) or cast in most cases
- Physical therapy for several weeks after surgery at some point is standard
Closing Thoughts

Ankle replacements have been around for 20 years. The technology has gradually evolved. There is a high rate of success for ankle replacements, but it’s not 100%.

There is a chance you might limp to some extent. If an ankle replacement fails for some reason, it can be revised to a new ankle replacement or converted to an ankle fusion.

I hope the last two weeks have given you some information about how problem ankles can be treated.

Ciao (Italian for see ya!)

My patients put their trust in me and what I do improves the quality of their lives.

Gratiot County Herald Archive and Office Website

I hope what you have read has raised questions. No problem!

Please log onto www.orthopodsurgeon.com. It has a huge amount of musculoskeletal information in the Website and the Archive of all previous GCH articles.

Check it out and be amazed what you can learn.

Good health. Good life. All the best to you. Be well.

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