Total Ankle Replacement

Tibial component

Talar component
What is a Total Ankle Replacement?

A Total Ankle Replacement is an operation where the surfaces of the ankle joint are replaced. This involves resurfacing both sides of the joint with metal components and placing a plastic bearing between them to allow movement (See picture).

The operation takes about two hours and is usually performed under general anaesthesia. A lower leg local anaesthetic block provides pain relief following surgery. The anaesthetist will discuss the most suitable method of anaesthesia for you.

A 15 cm incision (cut) is made over the front of the ankle. The arthritic surfaces are removed and if necessary re-shaped to correct any deformity. The artificial joint is then inserted and the wound closed.

Who is this operation for?

The Total Ankle Replacement is considered for patients with arthritis of the ankle in whom non-operative treatment has been exhausted. This is usually osteoarthritis or inflammatory arthritis such as rheumatoid arthritis. Occasionally ankle replacement is considered as a result of trauma.

Other surgery may have already been considered or tried including arthroscopy and ankle fusion.

Pain and disability are the main indications for surgery.

Ankle replacement preserves the movement of the ankle joint and relieves pain. This allows for a more normal walking pattern and reduces the risk of secondary arthritis in the joints around the ankle. This can be a problem if the ankle is fused.

What can I expect after the operation?

Following your operation you will remain in hospital for approximately 2 to 3 days. When you arrive back on the ward from theatre your leg will be in a back slab (half plaster cast) from toe to knee and elevated to reduce swelling. Your foot will be numb due to the local anaesthetic block. This will gradually wear off over 24 hours.

A check x-ray will be taken prior to discharge.

A Physiotherapist will teach you how to walk with crutches without putting the leg to the ground (non weight bearing). You will be non-weight bearing for 2 weeks in this backslab. You will likely continue to need your crutches for the first 6 weeks.
Are there any risks associated with a Total Ankle Replacement?

- Stiffness of foot and ankle
- Bleeding.
- Infection— All invasive procedures carry a small risk of infection.
- Delayed wound healing.
- Swelling.
- A joint that continues to be painful.
- Failure requiring revision surgery— Ankle replacement surgery has a 7-11% overall failure rate. According to recent research, 86% of ankle replacements last 5 years and 76% of ankle replacements last 10 years.
- Injury to nerves – Numbness or tingling can occur at the wound or in the foot. This is usually temporary but sometimes may be permanent.
- Blood clots— Deep vein thrombosis (DVT) or pulmonary embolism (PE) is rare. If you or your family have a history please let us know.
- Need for further surgery.

What do I need to do before the operation?

It is a good idea to get things organised for your discharge from hospital. Below is a list of things it might be a good idea to organise:

- Help with household tasks
- Food cupboards stocked up
- Help with shopping
- Help with children, pets and relatives organised for your return home
- Transport to and from hospital

What happens after discharge?

We will arrange to see you in the Orthopaedic Outpatients' Department two weeks following the surgery. The back slab will be removed and your wound will be inspected. If the wounds are healed then a removable boot will be applied for you to walk in. This is to be worn during the day for walking but need not be worn at night. With this boot on, you can begin to take weight through your ankle 2 weeks after your operation. You will need this boot until you are 6 weeks after your operation. During this time it is likely that you will continue to require the use of your crutches.
After the backslab has been removed, we will send you to see a Physiotherapist as an Outpatient. They will give you exercises to move your ankle and teach you to walk with your removable boot.

**When can I return to work?**

If you have an office type of job and you are able to elevate the leg then you may return to work approximately 4 weeks following surgery. However, if your job is physically demanding and usually involves long periods on your feet then it is advisable not to return for up to 3 to 6 months. This decision will depend on where your type of employment falls between these two extremes.

**When is it safe to drive?**

If you have a replacement on the left ankle and an automatic car, you can usually drive by two to four weeks after your operation. Otherwise, it will take you about 2 to 3 months to drive with your replaced ankle. You must be able to perform an emergency stop. Your insurance company must be notified regarding the type of operation that you have undergone to ensure that cover is valid.

**What should I do if I have a problem?**

If you experience severe pain, excessive swelling, discharge, excessive numbness or pins and needles please report it to your GP. If you cannot contact your GP you should contact A&E.

**Further Information and advice**

You can contact our Patient Advice and Liaison Service (PALS) on free phone 0800 7838058 or pals@dchft.nhs.uk

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