To Create An Extraordinary Quality Of Life, You Must Create A Vision That's Not Only Obtainable, But That Is Sustainable

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INTRODUCTION:

Ankle osteoarthritis is much less frequent than knee or hip osteoarthritis, but it can be equally disabling, greatly affecting the quality of life of the patients. After the failure of conservative-medical treatment, two large groups of surgical treatment have been described: joint-preserving and joint-sacrificing procedures.

REPORT:

A 73 years old lady with underlying diabetes, dyslipidemia and history of bilateral total knee replacement in 2018, presented with the complaint of pain and swelling at left ankle for the past 4 years. She also complained of pain over right ankle upon walking on uneven surfaces.

On examination of right ankle, noted there is swelling over the lateral aspect of ankle and deformity seen. There are tenderness over the anterior aspect of right ankle and posterior aspect of the medial malleolus upon palpation. The ankle is not warm. Her right ankle dorsiflexion is 20 degrees and plantarflexion is 30 degrees. Silfverskoiold test is negative. CT scan of right ankle showed multiple osteophytes and subchondral cysts at ankle and subtalar joint. Large marginal erosion at subtalar joint. Soft tissue swelling at posterior aspect of lateral malleolus.

Right tibiotalocalcaneal (TTC) with talonavicular (TN) fusion and bone graft insertion was done. Intra-operatively noted sclerotic changes over calcaneum and talus with multiple large bone cysts. Curettage done, anterior tibiotalocalcaneal plate was inserted. Screws were used to complete talonavicular fusion.

Two months post operatively patient was started on walking frame ambulation and was referred to physiotherapy for gait training. Currently, patient was on full weight bearing with no pain over right ankle.





FIGURE 1: Pre Operation Right Ankle X ray





FIGURE 2: Post Operation Right Ankle Xray

CONCLUSION:

Ankle arthrodesis is a good option in managing ankle arthritis.

REFERENCES:

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