

SYNDESMOSIS INJURY SURGERY



SURGERY INFORMATION



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THE SURGERY

- The surgery may require a camera inside the ankle joint
- The surgery involves an incision (sometimes more than one) over the syndesmosis and on the outside of the ankle joint
- The syndesmosis joint is debrided and the bones are put back into the correct position and held in place with screws or a tightrope device
- Xrays are used in theatre to make sure the bones are aligned correctly, and there is a tourniquet placed around the thigh to help with bleeding



Post operative xray of syndesmosis surgery using screws

THE HOSPITAL STAY

- You will wake up with a **moonboot**
- Your foot will be elevated overnight, and you have **antibiotics through a drip**
- You will need **blood thinners to prevent DVT** and **vitamin C** to help wound healing and pain management for 6-12 weeks
- You will stay in hospital for **1-2 days** with antibiotics, blood thinners, regular paracetamol, regular laxatives, regular vitamin C and stronger pain killers to take if and when required
- You will be only allowed to **touch your foot to the ground for 6 weeks**
- Depending on your balance and strength, you may need rehabilitation post operatively
- Buying a second hand **knee scooter** pre operatively (can search online) and practicing at home before the surgery, can be helpful; please bring it into the hospital with you. It is easier to use a knee scooter than crutches

WHEN YOU GO HOME

- You will need **medications** for pain relief; regular paracetamol (2 tablets four times a day) is recommended, as well as strong pain killers, especially at night before bed. These can have side effects of drowsiness, nausea and constipation, and other tablets to help with these side effects may be required.
- You will need **blood thinners to prevent blood clots** and **vitamin C** for 6-12 weeks
- You will need a shower chair and bags to **keep the moonboot dry** for the first 2-3 weeks
- You will need to attend your **post op appointment** in 2-3 weeks where the wounds will be checked
- After this you will be able to shower with a shower chair out of the boot

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REHABILITATION

All patients are different. These timelines are only a guide, and some patients may progress faster or slower than others.

0-3 weeks	<ul style="list-style-type: none"> You will be in a moonboot for 2-3 weeks; please treat this like a plaster and do not remove it You will only be allowed to touch your foot to the ground for balance. Please keep your foot elevated and out of bed for toilet only You will need to bag the leg for showers Pain relief: Please take regular paracetamol with meals and before bed; stronger pain killers are often needed, especially before bed Please take blood thinners and vitamin C as prescribed
2-3 weeks	<ul style="list-style-type: none"> Post op appointment with a wound check and an xray Seated showering can commence without the boot but wear the boot at all other times (including at night) Commence isometric strengthening and range of motion exercises with physiotherapy
6 weeks	<ul style="list-style-type: none"> Wear the boot for weightbearing; otherwise can be removed Commence progressive weightbearing in a boot over 6 weeks, starting with crutches
3 months	<ul style="list-style-type: none"> Commence weight bearing without the boot and resisted strengthening You will still have ongoing swelling but you can wear normal shoes if you can fit into them (supportive sneakers are best) Swimming and cycling can commence

6 months	<ul style="list-style-type: none"> If screws are used, the screws may need to be removed with a minor surgery (day case); sometimes the screws may break You can start sports-specific training and increase to impact sports
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WHEN CAN I DRIVE?

- Left foot 2-3 weeks (if driving an automatic car)
- Right foot 6-8 weeks

WHEN CAN I RETURN TO WORK?

- Seated work at 3 - 6 weeks
- Prolonged standing 6-9 months
- Heavy labour work 9-12 months

WHAT CAN GO WRONG?

- Anaesthetic problems
- Wound/scar problems
- Nerve/vessel/tendon injury
- Blood clots
- Infection
- Stiffness
- The foot does not heal
- The foot heals in the wrong position
- Ongoing pain
- Arthritis
- The need for further surgery

CONTACT

If you want more information, or have any questions or problems, please contact Dr Graff on admin@christygraff.com or please call the rooms on **0493 461 133**