Argus Orthopaedic Zone

Ankle Fracture - Treatment

By Thomas J. Haverbush, M.D. Orthopaedic Surgeon

Transforming patient information into patient understanding.

I indicated last week that I see a spectrum of ankle fractures. They range from hairline fractures of the outer or lateral bone of the ankle to complex fracture - dislocations in which the whole ankle structure is broken and dislocated sideways and backwards. The severe ones are a big challenge to treat.

Stable or Unstable

If only one side of the ankle is broken and the bone is in good position, that is the most favorable one to treat.

The whole key is will the fracture move or stay put. If I'm convinced the fracture is stable and won't move, I can often treat it with one of the so called Air Cast Walking Braces. They give really good support and a big plus is they can be removed for bathing. Patients love that part.

If I think the fracture might move, I usually use a fiberglass cast for about four weeks and then might switch to a brace.

All ankle fractures treated in this way have a good outlook, but they don't all heal in six weeks as all my patients hope!

Displaced

If the fracture doesn't line up right or is displaced, surgery is often required to put it back in the right place for healing. The next part is that I usually have to insert some metal to hold things together. It could be -

- A metal screw or screws
- A plate and screws
- A metal rod
- Wires wrapped around the bone
- Some combination of the above.

This makes for better healing because the broken bone has a much better possibility of healing correctly. The bone doesn't heal faster because of surgery, however.

Broken Bone, Torn Ligament

I often see a combination of broken bone and damaged (torn) ligaments. This almost always needs surgery to repair the torn ligaments and fix the bone with some metal device.

Open or Compound Fractures

We are getting into some injuries you really don't want to have! If the skin tears exposing the bone to the outside environment, you have a so called *compound fracture*. Very bad to have because the ankle can become infected. This can completely spoil the surgical procedure and lead to untold chronic complications.

Bad and Worse

These fractures are so bad that even though I can put them back together, I know that the outcome will be uncertain. Limping, stiffness and some pain can be the permanent result of these severe fractures. Arthritis can set in at a fairly early time also (as in several months not years).

Conclusion

I hate to end on such a gloomy note. The point is that the outcome of your injury is mostly determined by the <u>severity</u> of the injury. I try not to present it as hopeless to the patient and family. But if you don't let people know how it might turn out right from the beginning, they tend to be angry later, because they thought everything was going to be fine.

These unfortunate injuries are a challenge for the surgeon and the patient.

Please be careful!

Argus Orthopaedic Zone Archive and Office Website

The office website www.orthopodsurgeon.com and the Argus
Orthopaedic Zone archive are your window to the Orthopaedic world!

www.orthopodsurgeon.com contains

- The Website Library of Information
- Your Orthopaedic Connection
- Argus Orthopaedic Zone Archive

I urge you to log onto the website and check it all out. You will be amazed at all the useful information it contains.

The Argus Orthopaedic Zone archive contains the complete text of every article I have ever written for Shepherd Argus. Please check it out for interesting articles you may have missed.

I very much appreciate all of you loyal readers, patients and future patients. I am here for you in the office, in Argus Orthopaedic Zone and on the office website.

All of the information pertains to everything I treat in the office and hospital.

Our goal is simple - To help people return to more pain free, functional lives. I specialize in you.

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

Dr. Haverbush