# **Ankle Arthroscopy**

# What is ankle arthroscopy?

Ankle arthroscopy is minimally invasive surgery into the ankle joint through key holes using special instruments including a camera.

## Why is it performed?

An ankle arthroscopy is performed for a variety of conditions affecting the ankle, the symptoms of which are

- Pain
- Weakness or instability in the ankle
- Swelling
- Osteochondral lesions
- Loose bodies
- Arthritis treatment (before corrective osteotomy)

#### What conditions are treatable?

These include Anterior or Posterior Impingement, Osteochondral defects or early

osteoarthritis. After examination surgeon will decide whether you need an MRI scan to assess the ankle joint. Physiotherapy, braces or injections may be tried if appropriate before considering arthroscopy.

#### What does the operation involve?

The operation is done under general anesthetic as a day case. The operation itself involves making two small incisions over the ankle joint and inserting a probe with a camera to look at the inside of the joint and to carry out any necessary surgery.

#### Is it painful?

Whilst you are in hospital the medical staff will give you pain killers as required and prescribed. When you are at home you may find Paracetamol or Ibuprofen (if tolerated) useful for controlling any pain. Instructions on management of pain will be given by the nursing staff before you leave the hospital.

#### How long does recovery take? / What happens after surgery?

Most patients take around 2 weeks to recover. There will be a padded dressing and bandage over the ankle joint but you will be able to walk after the operation. In certain cases a temporary cast or a walking boot may be necessary. Crutches will be useful for a few weeks. Your surgeon will advise on this after surgery. Swelling is quite common after foot and ankle surgery and this is best managed by elevating the foot at regular intervals. Your wound dressing will be changed and stitches removed (if applicable) at the clinic during your follow up appointment, which is usually 2 weeks after the operation. You should be able to wear normal shoes after two weeks. The swelling will continue up to 6 months afterwards. Patients having had the left ankle operated on will be able to drive an automatic car within two weeks if they don't have plaster or any support ( you should always check with your insurance company). Those who have had an operation on the right side will be able to drive after about 2-6weeks depending on actual surgery performed. You are advised not to fly after surgery for about 6 weeks. Swimming will be possible once the sutures are removed and wound is healed.

In cases where arthroscopy is accompanied with other procedures(like lateral ligament reconstruction and syndesmosis reconstruction, a different rehabilitation plan will be followed. Your surgeon will discuss this whilst listing you for the surgery.

Please follow "Precautions following Surgery" as mentioned elsewhere on this website.

## When can I go back to work?

This will depend on the type of work you do. For example if you have a desk job you should be able to return to work after 48 hours. If on the other hand you do manual work where there would be a lot of pressure on the foot then you may need 4 to 6 weeks off work. This is just a rough guide and can be dependent on the type of operation is done along with your key hole surgery ( for example a ligament reconstruction and syndesmosis repair)

#### What about sport?

Your return to sport will depend on the damage to your ankle which caused you to have the arthroscopy in the first place and on any other necessary treatment. Your surgeon will advise as to the best course of action with regard to return to sport.

#### What can go wrong?

All operative interventions have an inbuilt risk and complication rate. The risks following arthroscopy to the ankle are as follows:

- Infection
- Bleeding into the joint
- Swelling & stiffness
- Nerve injury (numbness over parts the foot)
- Deep vein thrombosis (blood clot in leg vein), pulmonary embolism (clots in lungs)
- Recurrent symptoms, scar, failure of operation needing revision surgery
- Complex regional pain syndrome

The above complications are rare but can occur.

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