Brostrum Repair - Guidelines for rehabilitation (MR LIMAYE)

Week	Mobility	Weight bearing	Rehabilitation exercise	Goals
0-2 2-6	Back slab Below Knee POP cast.	NWB NWB	Prophylactic/circulatory exercises (SQ, Static Gluts, ROM Knee/Hip). Advice re: elevation.	Prevent post op complications Independent on crutches Education.
6-10 *Commence physiotherapy	Air cast boot (day time only)	PWB to progress to FWB as pain allows.	Pain and oedema control. Prophylactic/circulatory exercises. Active range of movement exercises (dorsiflexion and plantarflexion only). Early strengthening isometrics (can include inversion/eversion). Progressing to theraband — plantar/dorsiflexion only. Early proprioception (heel raise and ball rolling in sitting). Foot intrinsics. Mobilise intermetatarsal and midtarsal joints (not subtalar)	Pain and swelling control. Prevent scar adhesion. Good range of active plantar/dorsiflexion.
10-16	Airsport brace (daytime only)	FWB	Begin active inversion and eversion. Gait re-education. Resisted exercise plantar/dorsiflexion. Commence closed chain exercises. Proprioception/weight transference/SLS Power walking on Treadmill	Achieve full range of movement in all directions. Normal Gait pattern

	Increase CV work - Cross trainer/Bike
From 6 Months Ankle support for sport only	Start Treadmill running, and progress to road running. Plyometrics Agility work Sport Specific Training Return to sport. Equal proprioception both sides Full strength Return to full function

- No Impact/Plyometrics till 6/12. No driving before removal of Aircast boot at 10/52. (When movement and strength are sufficient).
 - Not covered by Insurance/DVLA whilst in Aircast.
 - With all foot and ankle surgery swelling may persist for up to 1 year.