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Overview

During this procedure, the surgeon removes diseased or damaged portions of the ankle. The surgeon implants an artificial ankle joint consisting of metal and plastic components. The new joint will help reduce pain and restore mobility to the ankle.

Preparation

In preparation for the procedure, anesthesia is administered and the ankle is cleansed with an antiseptic solution.

Removing Damaged Bone

The surgeon creates an incision in the front of the ankle. The joint is carefully examined. The surgeon prepares the joint for the new components by removing a portion of the tibia and the talus. The surgeon may also remove a portion of the fibula.

Inserting the Implant

After the joint is prepared, the surgeon inserts the components of the artificial ankle. The talar component replaces the top of the talus, and the tibial component is fitted into the end of the tibia. A plastic cup positioned between these two components will allow them to glide smoothly against each other.

Stabilizing the Implant

Depending on the patient's need, the surgeon may also choose to fuse the fibula and tibia. The surgeon may place bone graft between these bones to encourage them to grow together, or the surgeon may use a plate and screws.

End of Procedure

When the implantation is complete, the surgeon tests the new ankle joint to make sure the components fit together properly. The incision is closed with sutures or surgical staples. The ankle is bandaged and placed in a splint or a cast.

Aftercare

After healing, the patient will begin physical therapy. The patient will not be allowed to place weight on the ankle for at least six weeks. An ankle support may be required for up to one year after the surgery.

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