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Ankle arthroscopy
is a minimally
invasive surgical
procedure that Dr
Slater uses to treat
problems in the
ankle joint.

Ankle arthroscopy uses a thin fiber-optic camera (arthroscope) that can magnify and transmit images of the ankle to a video screen.

Ankle arthroscopy allows the surgeon to see inside the ankle with small incisions. This minimises problems sometimes encountered with large incisions, such as infection and pain. Patients may be able to begin rehabilitation sooner, and they may be able to return to high-level activities such as sports more quickly.





What is arthroscopy used for?

Ankle arthritis

Distraction arthroplasty, ankle fusion and ankle replacement are surgical treatment options appropriate for many patients with end-stage ankle arthritis. Ankle arthroscopy offers a minimally invasive way to perform these surgical techniques.

Ankle fractures

Using arthroscopy can help to ensure normal alignment of bone and cartilage. It may also be used during ankle fracture repair to look for cartilage injuries inside the ankle.

Ankle instability

Ligaments of the ankle can

become stretched out, which can lead to a feeling that the ankle gives way. These ligaments can be stabilized using an arthroscopic Brostrom technique.

Arthrofibrosis

Scar tissue can form within the ankle, leading to a painful and stiff joint. This is known as arthrofibrosis. Ankle arthroscopy can be used to identify the scar tissue and remove it.

Infection

Infection within the joint space cannot be treated with antibiotics alone. It often requires an urgent surgery to wash out the joint. This can be done with arthroscopy.





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Anterior ankle impingement

Ankle impingement occurs when bone or soft tissue at the front of the ankle joint becomes inflamed. Symptoms include ankle pain and swelling. This can limit the ability to bend the ankle. Walking uphill is often painful. Osteophytes (bone spurs) can be seen on X-ray. Arthroscopy can be used to shave away inflamed tissues and bone spurs.

Loose bodies

Cartilage, bone and scar tissue can become free floating in the joint and form what is referred to as loose bodies. Loose bodies can be painful and can cause problems such as clicking and catching. Locking of the ankle joint may occur. Ankle arthroscopy can be used to find and remove the loose bodies.

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Osteochondral Defect (OCD)

These are areas of damaged cartilage and bone in the ankle joint. OCDs are usually caused by injuries to the ankle such as fractures and sprains. Common symptoms include ankle pain and swelling. Patients may complain of catching or clicking in the ankle. The diagnosis is made with a combination of a physical exam and imaging studies. Imaging may include X-rays and an MRI scan. The treatment is based on the size, location, and stability of the OCD. The patient's symptoms and activity demands are also considered. Surgery often consists of removing the damaged cartilage and drilling small holes in the bone to promote healing. Bone grafting and cartilage transplant procedures can also be performed.

Posterior ankle impingement

This occurs when the soft tissue at the back of the ankle becomes inflamed. Pointing the foot down can be painful. This overuse syndrome occurs commonly in dancers. It can be associated with an extra bone called an os trigonum. The problem tissue can be removed with arthroscopy.

Synovitis:

The soft tissue lining of the ankle joint (synovial tissue) can become inflamed. This causes pain and swelling. It can be caused by injury and overuse. Inflammatory arthritis (rheumatoid arthritis) and osteoarthritis can also cause synovitis. Ankle arthroscopy can be used to surgically remove inflamed tissue that does not respond to nonsurgical treatment.

Unexplained ankle symptoms

Occasionally patients develop symptoms that cannot be explained by other diagnostic techniques. Arthroscopy provides the opportunity to look directly into the joint. The surgeon can then identify problems that may be treated with surgery.



Osteochondral Defect (OCD)





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General Details of Procedure

At least two small incisions are made in the front and/or back of the ankle. These "portals" become the entry sites into the ankle for the arthroscopic camera and instruments. Sterile fluid flows into the joint to expand it and allow better visualization.

The camera and instruments can be exchanged between portals to perform the surgery. After the surgery is complete, sutures are placed to close the portals. A sterile dressing is placed over the sutures. A splint or boot is often used.

What happens after the procedure?

Post surgery, you may be able weight bear immediately as tolerated through a Range of Motion boot post operatively. This will stabilize the ankle joint during the rehabilitation period. You can expect some pain and swelling following surgery. The leg may need to be kept elevated and you may need to take oral pain medication for several days.

You will likely be examined at **2 week, 4 weeks**, and six weeks post operatively

