

Having Ankle Fusion



Ankle fusion (ankle arthrodesis) is a type of surgery used to join two or more bones of your ankle. The surgery is done to treat different types of arthritis or severe deformity in the ankle.

What to tell your healthcare provider

Tell your healthcare provider about all the medicines you take. This includes over-the-counter medicines like ibuprofen and aspirin. It also includes vitamins, herbs, and other supplements. And tell your healthcare provider if you:

- Have had any recent health conditions or changes in your health, such as an infection or fever
- Are sensitive or allergic to any metals, medicines, latex, tape, or anesthetic medicines (local and general)
- Are pregnant or think you may be pregnant

Tests before your surgery

Before your surgery, you may need imaging tests. These may include CT scan, ultrasound, X-rays, or MRI.

Getting ready for your surgery

Your ankle fusion will be done by an orthopedic surgeon. This is a surgeon who specializes in treating bone, muscle, joint, and tendon problems. Talk with your surgeon about how to get ready for your surgery. You may need to stop taking some medicines before the procedure, such as blood thinners and aspirin. If you smoke, you may need to stop before your surgery. Smoking can delay healing. Talk with your surgeon if you need help to stop smoking.

Also, make sure to:

- Ask a family member or friend to take you home from the hospital. You can't drive yourself.
- Plan some changes at home to help you recover. You won't be able to walk on your foot normally for a while. You may need help at home.
- Follow any directions you are given for not eating or drinking before surgery.
- Follow all other instructions from your healthcare provider and the surgery team.

You will be asked to sign a consent form that gives your permission to do the procedure. Read the form carefully. Ask questions if something is not clear.

On the day of surgery

The surgery can be done in several ways. Ask your surgeon about the details of your surgery. The preparation and surgery may take a couple of hours. During your surgery:

- You may have general anesthesia. This is medicine that allows you to sleep through the surgery. Or you may have spinal anesthesia. This is so you won't feel anything from your waist down. You'll also likely be given sedation medicine. This will help you relax and sleep through the surgery.
- A healthcare provider will watch your vital signs, such as your heart rate and blood pressure, during the surgery.

- The surgeon will make a cut (incision) through the skin and muscle of your ankle. An incision may also be made on your foot. If you have minimally invasive surgery, the incisions will be small. A scope with a tiny camera with a light may be used to help do the surgery.
- Your surgeon will remove cartilage from the affected joint. The bones in the joint will then be put together in the correct position. They will be attached with screws or other hardware. A bone graft may be used to help the bones heal together.
- Other repairs are made to the area as needed.
- The surgeon will close the layers of muscle and skin around your ankle and foot with stitches (sutures), staples, or by other means.

After your surgery

Just after surgery, your leg will likely be elevated and in a brace or splint to keep it from moving. Nurses will check your breathing, heart rate, blood pressure, and ankle. You may stay in the hospital for a day or two. Or you may go home right after surgery.

You will have pain after your surgery, especially in the first few days. Pain medicines will help relieve your pain. Keep your leg elevated as much as possible. This can help reduce swelling and pain. Make sure to tell your surgeon right away if you have a high fever or if pain in your ankle or calf gets worse.

When you go home, you will likely need to use crutches or a walker. This is so you can keep weight off your leg while the ankle heals. You may need help at home while you recover.

Follow-up care

After your surgery, you will likely need to wear a splint for a couple of weeks. You might also need to use crutches for several weeks. Your surgeon will give you instructions about how you can move your ankle and foot as you recover. You won't be able to put your full weight on it for a few months. You may need help at home during this time.

You may have your splint replaced with a cast or boot a couple of weeks after surgery. You may have physical therapy for a few months. It may be several months before you can go back to all of your normal activities.

For optimal healing, follow your surgeon's activity guidelines and restrictions, including instructions about medicines, wound care, and exercises. This will help to make sure the fusion is successful. If you have any questions or concerns, call the surgeon's office.

Make sure you keep your follow-up appointments.

When to call your healthcare provider

Call your healthcare provider right away if you have any of these:

- Chest pain or trouble breathing (**call 911**)
- Fever of 100.4°F (38°C) or higher, or as instructed by your healthcare provider
- Shaking chills
- Splint or cast that seems too tight or too loose
- Ankle splint, cast, or dressing that gets wet or soggy
- Pale color or discoloration of the skin around the cast
- Numbness or tingling near or under the cast or to the foot
- Foot or toes that are pale, blue, or cool to touch
- Pain that gets worse with or without activity

- Painful calf that is warm to the touch and tender with pressure
- Increased redness, tenderness, bleeding, or swelling of the incision
- Drainage from or opening of the incision
- Swelling in the foot, ankle, or calf that is not relieved by elevating the feet
- Other signs or symptoms as directed by your healthcare provider

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