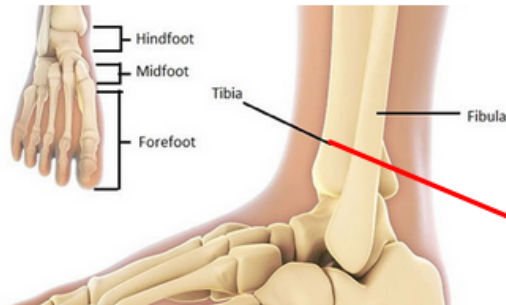




BIG TOE



THIS PHOTO IS FOR THIS SECTION ONLY

THIS IS A SEPARATE SECTION

Management of trauma:

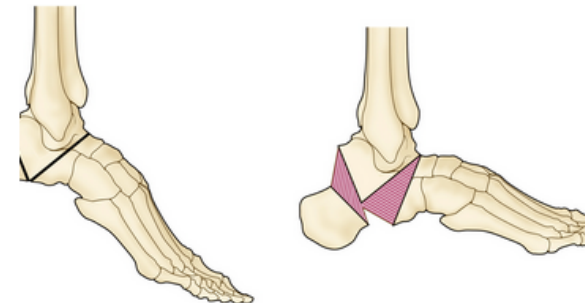
Trauma and fractures to the foot and ankle are debilitating. Although many can be managed with non operative means, some do require surgery for fixation to get you up and back to your normal daily activities as quickly as possible.

Hindfoot, Ankle and Midfoot Fusion:

In cases of arthritis (wearing down) of the joints and bones of the foot it may be necessary to join or fuse those joints in order to eliminate movement and thus take away the pain generated by these joints. Various types of fusions are available and there are multiple options depending on which joint is affected. These options will be discussed with you in detail and a joint decision will be made to suit your needs.

Pes Cavus Reconstruction :

Cavus foot is a condition in which the inside arch of the foot is very high. This can be on the spectrum of normal or due to an underlying condition such as club foot or neuromuscular disorders. There are specialised orthotics or inserts which can be used to ease walking. There are also surgeries which can be performed to reduce or lower the arch and to correct the associated deformities of the forefoot and heel. The aim is to get a comfortable, neutrally aligned foot.



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REMOVE AND PLACE SEPARATELY.

Lateral Ligament Repair/ Reconstruction (Ankle Instability):

ankle instability is usually a result of ligament/tendon failure. It results in pain, impingement, and frequent sprains or twisting of the ankle joint. If neglected, instability can result in abnormal loading of the joint and arthritis. If the ligament tear has occurred recently, there is potential for repair of the torn ligament. Should it be chronic or have occurred over some time, it is usually necessary to reconstruct the ligament. This entails using one of the body's own tendons as a graft, using donor graft or using synthetic materials to reconstruct and stabilize the affected joint.

Reconstructive Surgery for Ankle and Hindfoot Deformities:

Deformity or mal alignment of the foot can be congenital or acquired (due to trauma or infection) and can be addressed with corrective surgery. This usually includes a cut into the bone or joint, correcting the deformity and fixation in the corrected position with either screws or a plate.

Repair of Acute Achilles Tendon Ruptures:

Using the most modern techniques, it is now possible to repair an acutely torn achilles (heel chord) using minimally invasive surgical techniques. A small 2 cm incision along with a further few 3mm incisions are all that's needed to repair the damaged tendon.

Reconstruction of Chronic Achilles Tendon Ruptures:

Chronic Achilles tendon rupture is usually defined as the rupture that occurs in 4 to 6 weeks after injury. The symptoms of chronic Achilles tendon rupture include pain, decreased strength, fatigue, and ankle stiffness. Chronic or long standing achilles ruptures are more difficult to manage than that newly torn ones. Surgery usually involves transfer of one of the adjacent tendons to take over the function of the old shortened tendon or lengthening of the shortened Achilles tendon.





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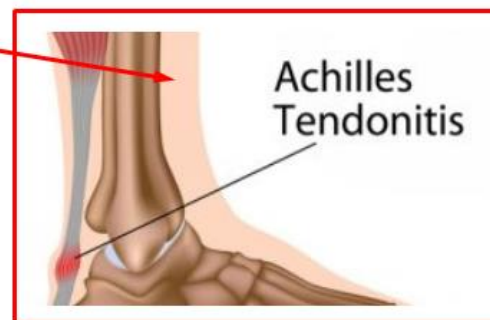
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WRONG PICTURE

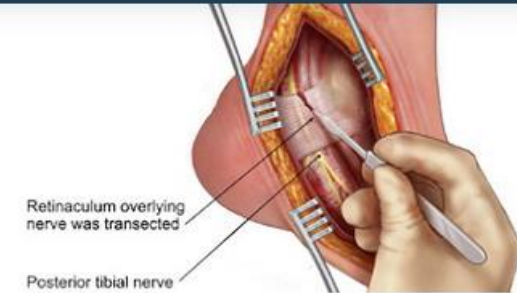


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Tarsal Tunnel Release:

Tarsal tunnel syndrome usually develops as a result of prior ankle injury. All other causes of tarsal tunnel syndrome may include flat feet, bony outgrowths in the tarsal tunnel, varicose veins, inflammation from arthritis, diabetes and trauma. Symptoms may include burning pain at the sole of the foot that's worse when standing during activity. Other symptoms include numbness or tingling at the base of the foot. If tarsal tunnel syndrome is left untreated, it can result in permanent and irreversible nerve damage. Treatments can range from conservatives such as anti-inflammatory medication based ice compression and elevation. In severe cases it is recommended to have surgery, which includes the release of the ligament compressing the nerve within the tarsal tunnel. This can be done in an open fashion by arthroscopic surgery.



GAP HERE

Rehab :

Following foot and ankle surgery your rehabilitation will be facilitated by our competent team of physiotherapists, occupational therapists and orthotists. The nature of your surgery will determine the degree of weight-bearing allowed post operatively. In cases where no weight can be placed on the limb for a period of time you will be provided with an assistive device and aided by physiotherapy so that you can mobilise safely.

GAP HERE

MIS:

There are certain procedures which can be done using minimally invasive surgery. Should this option be available for your condition it will be discussed with you during the consultation.



Arthroscopy:

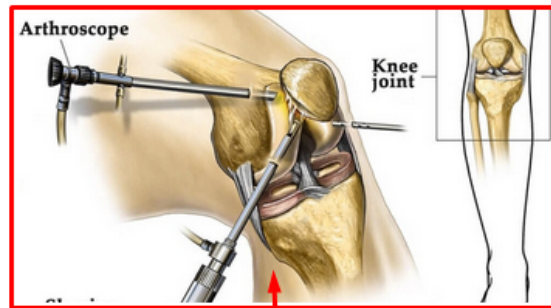
Arthroscopic surgery involves the insertion of the camera into the ankle joint through a small 5 mm incision. A second incision will be made in order to allow for instrument insertion. Surgery can then be performed through these two portals, within the ankle joint. When operating on the back of the ankle to similar incisions will be made on either side of

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CONTACT



Midlands Orthopaedics - Hilton

