

A Patient's Guide To Ankle Fractures



What is an ankle fracture and how does it happen?

If your ankle joint twists during an injury or fall, you can break one or both bones of the ankle joint. This is called an ankle fracture – we use the words fracture and break to mean the same thing.

Will I need an operation?

Whether you need an operation will depend on the position of the bones after the break and how likely they are to stay in the same position.

If the bones are in a good position (which is only slightly different to how they would normally be) and it is likely that they won't move further, then your ankle fracture may be treated without an operation in either a plaster cast or a special boot.

You may need to come back to the fracture clinic a week and sometimes two weeks after the injury and have another X-ray to ensure the bones are still in a good position.

However, if the bones are out of place and are unlikely to stay in the same position, it is likely you will be offered surgery to align the bones and ankle joint into the correct position. This will usually be done with plates and screws and your surgeon will explain the risks and benefits of your specific surgery.

Do I have to have surgery?

The main aim of any surgery around a joint such as the ankle joint is to restore the joint function and minimise the risk of arthritis (pain and stiffness) developing in the joint.

If the bones are not correctly aligned and they are allowed to heal in an abnormal position, there is a more likely chance that the joint will become painful and stiff.

Again, your surgeon will explain the risks and benefits to your specific injury. If you decide not to have the operation, you will be treated in a plaster cast and advised to not put any weight through the cast for 6 weeks.

If I need surgery, when will I have it?

There is often a lot of swelling around the ankle after an injury and we often have to wait a few days or even a couple of weeks for all of the swelling to settle down before it is safe to make cuts in the skin for surgery. You may be allowed to go home and return for an operation.

You may need to come back to the fracture clinic a week or so after your injury to check the swelling and confirm a date for surgery. The co-ordinators will be in touch with you regarding clinic appointments and dates for surgery.

In the meantime, you can keep your leg elevated as high as possible (above the level of the groin) on pillows. Ice packs can also help.

What are the risks of ankle fracture surgery?

You will see your surgeon on the day of surgery who will give you specific information on the type of surgery you will be having and the specific risks and benefits. In general, some of the more common risks are:

- Infection – if this occurs you may require antibiotics or further operations.
- Blood clots in the legs (thrombosis). These can occasionally move into the bloodstream into the lungs (embolus), causing breathing difficulties (the risk of this is less than 1 in 100). You will be encouraged to get out of bed after surgery, drink plenty of fluids and you will be given a daily injection to reduce the risk of blood clots.
- Failure of the implants: this occurs when there is loosening or breaking of the plates and screws. This can occur for many different reasons and may require a further operation. It is important to follow the surgeon's advice about weight bearing.
- Pain over the plate and screws: The plates and screws are just under the skin and if they irritate you a lot, they can possibly be removed at a much later date, but only when the bone has fully healed. We do not remove plates and screws routinely as they often do not cause any harm.

What happens during the surgery?

You will see the anaesthetic doctor on the day of surgery, and you will most likely have a general anaesthetic (you'll be asleep) and/or a regional nerve block to help manage your pain after the operation.

The ankle fracture will most likely be fixed with plates and screws and you may have one or more cuts around the ankle joint.

You will be given painkillers and advice about weight bearing after the surgery.

If you have come in as a day case you will likely go home the same day, but if you are already in the hospital, you may need to stay in a night or two in the hospital depending on the severity of the injury and the extent of the surgery.

How soon will I recover?

You will likely be in a plaster cast for between 2 and 6 weeks after surgery or you may require use of a special boot at some point in your recovery – this will depend on the type of injury and surgery you had and your surgeon will advise.

You will be seen by the physiotherapists after your operation to ensure you are safe on your crutches or walking frame.

If you smoke or vape, you should try to stop as nicotine can stop the wounds and bones from healing and delay your recovery.

You will usually be seen in the fracture clinic 2 weeks after your operation to check the wounds have healed and remove any stitches and then you will continue in a cast or boot as per your surgeons' instructions. You will likely be seen again 6-8 weeks after the injury in the fracture clinic for X-rays and examination.

It is likely you will be unable to drive for 6-12 weeks, and you will likely need a minimum of 6 weeks off work depending on the nature of your job. You can discuss this with your surgeon.

What about the future?

Most patients make a good recovery after surgery and return to their normal activities.

It is important to follow your surgeon's instructions and do the physiotherapy exercises.

Some swelling and mild stiffness and last for several months after the injury and there will always be a risk of developing arthritis after the injury.