



NIKHIL NANAVATI

Ankle arthroscopy/key hole surgery



Introduction

Arthroscopy is also called 'key-hole' surgery. A camera is used to visualise any problems in the ankle joint that can be treated at the same time. Some common conditions that can be treated with key-hole surgery include: ankle arthritis, cartilage injuries (also known as osteochondral lesions or OCDs) and excision of scar tissue. Some ankle fusions can also be performed with key-hole surgery.

The operation

Most of these procedures are performed under a general anaesthetic. Normally two small incisions are used to gain access to the ankle joint but more may be required depending on the complexity of the operation. One of these incisions is used for a camera to visualise the joint whilst the other is used to place instruments into the joint to treat any underlying conditions.



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Most of these cases are performed as a 'day-case' procedure meaning that you can go home on the same day. Ankle fusions will normally require a one night stay in hospital.

After the operation

The majority of procedures can be left with soft bandages and dressings which need to remain on and dry for 2 weeks. Patients can usually walk freely without restrictions and advised to keep the ankle joint moving.

Arthroscopic (key-hole) ankle fusions

Patients have a plaster cast on for 3 months in total. After 2 weeks, patients will be seen in the plaster room for an inspection of wounds and change of cast. Patients should not put weight through the affected side for 6 weeks and will be seen in the clinic with an X-ray at this point. If this X-ray is satisfactory, patients can then start to walk in their cast for a period of 6 weeks.

Another check X-ray will be performed at the 3 month mark. If this X-ray is satisfactory, the plaster cast can be removed.

Patients will normally require at least 6 weeks of medication to reduce the risk of blood clots.

Patients will also be provided with a personalised treatment plan following their individual operations.