

TIBIOTALOCALCANEAL ARTHRODESIS AS AN OPTION OF SURGICAL TREATMENT FOR PARALYTIC FLAIL ANKLE

Aida NS, Ridhayah AR, Ng LH, Amar I, Narinder S
Orthopaedic Department, Hospital Seberang Jaya, Pulau Pinang

INTRODUCTION:

Paralytic flail ankle is a loss of plantar and dorsiflexion with instability of ankle joint. There is a role of tibiotalocalcaneal arthrodesis in managing patients with paralytic flail ankle.

REPORT:

A 39-year-old Malay gentleman had an motorvehicle accident and sustained following injuries: right superior and inferior pubic rami fracture with bilateral sacroiliac joint disruption, open fracture midshaft right femur, open fracture proximal right tibia. Post trauma patient noted to have right flail ankle. Fixation was done over right femur and tibia. Nerve conduction study shows right sciatic nerve lesion. Right tibiotalocalcaneal(TTTC) nail was done for this patient once fracture united. Preoperatively patient having difficulty to walk due to joint instability secondary to right sciatic nerve injury. After fixation with hind foot nail, patient has more stable joint and able to bear weight and ambulate without high stepping gait.



Figure 1: Xray



Figure 2: Post operation

CONCLUSION:

Sciatic nerve injury is one of the causes of flail ankle. Tibiotalocalcaneal arthrodesis is an option for ankle stabilization in patient with flail ankle. For this patient, the choice of implant we used is TTTC nail. Patient shows good outcome and able to return to near pre-morbid ambulation. The benefits of using TTTC nail are the small wound size, less injury to soft tissue hence better wound healing and no prominent implant as compared to plating. We conclude that tibiotalocalcaneal arthrodesis can be considered as an option of surgical treatment for patient with paralytic flail ankle with good outcome.

REFERENCES:

1. Ring H, Tregar I, Gruendinger L, Hausdorff JM. 2009;18(1):41-7.
2. Stewart JD. Drop foot: where, why and what to do? Pract Neurol 2008; 8(3):158-69.