

After your ankle operation

A Physiotherapy patient leaflet:
for when you can fully weight bear

How much should I move and exercise my injured foot?

Early weight bearing (putting weight through your injured foot) has been shown to help increase the speed of healing. Try to walk as normally as possible **fully weight bearing** through the leg as this will help with your recovery. You may not be able to put much weight through your leg at first but try to aim to do this by two weeks after your operation.

You **should not** be mobilising (moving around) or have your ankle lowered to the floor for very long for two weeks after your surgery to allow the swelling to go down and the wound to heal.

Your wound will be checked and as long as it has healed then you can start to mobilise more on crutches. Be aware that if you are on your feet for long during the day or do too much your ankle will swell and this can impact on the healing of your injury. The ideal is little and often.

How can I prevent swelling?

You must keep your foot elevated, ideally above the level of your hips, whenever you are not moving for the first two weeks. If the ankle is not elevated, the wound may not heal properly and potentially risk an infection so this is very important.

When should I wear the boot?

The boot should be worn whenever you are moving, even around the house. It is for protection and support. You can remove the boot at night when sleeping and when resting and when you are doing your exercises.

Can I have some pain relief?

You will be given pain killers to take home. You should take this on a regular basis to begin with to help you move and do the exercises.

Can cold packs help?

A cold pack (ice/frozen peas) can provide short term pain relief right after the operation but this must be in a waterproof bag as you **must not** get the dressings wet. Apply it to the ankle for up to 15 minutes, every few hours. Make sure that the ice is never in direct contact with the skin. This may not have a significant effect while the bandages are on but will help more when the dressings are removed after two weeks.

What's the best way to wash?

The most important thing is to keep the dressings dry until the wound has healed and the dressings are removed.

Options for washing (depending on facilities) are a strip wash at a sink or a shower. You can put a waterproof bag over your leg or you can buy a cover called a Limbo from the internet.

Go to www.limboproducts.co.uk.

How can I manage stairs with my crutch?

Going Up: ABC (Able leg, Bad leg, Crutch to the same step)

Going Down: CBA (Crutch, Bad leg, Able leg to the same step)

Will I have on-going physiotherapy?

You will be referred to an NHS Outpatient physiotherapy department close to where you live. You should be seen around 3-4 weeks after your operation to review your progress but this depends on waiting times in different areas. You will continue to have regular physiotherapy appointments to help with your rehabilitation and help you to return to normal activities.

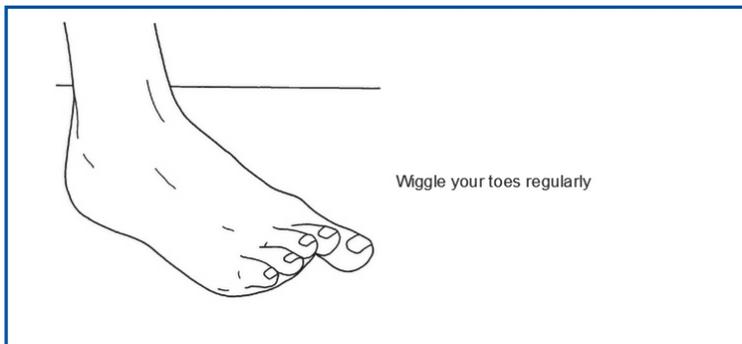
If you have private healthcare then we can give you a copy of your operation notes to take with you to your first appointment.

Please follow the management/rehabilitation plan shown below:

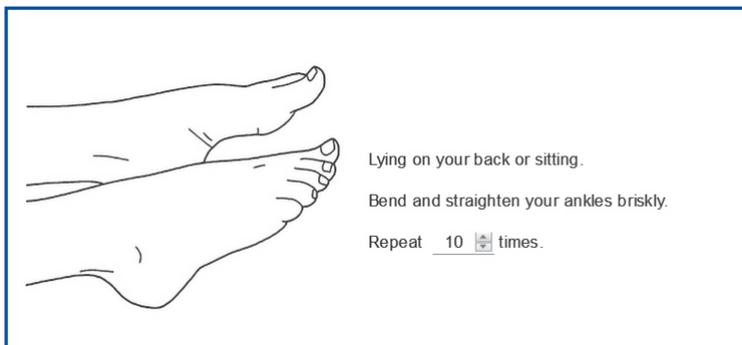
Weeks since injury	Rehabilitation plan
0-6	Wear boot all the time when mobilising. Walk with crutches fully weight bearing . Perform exercises below to help with range of movement. You should see a physiotherapist around 4 weeks after the operation to check on your progress.
6-8	You will have an orthopaedic follow up appointment around 6 weeks after the operation and another x-ray to check how the bone is healing. You should then be able to come out of the boot if all ok. Try and wean yourself out of the boot and walk without the crutches, around the house at first. You will want to wear it if you go on a long walk.
8 -12	The fracture is united (healed) and you can resume normal activity but be guided by any pain you are experiencing. You should be able to carry out day to day activities although difficult tasks/long walks may cause discomfort and swelling.

Initial Exercises to do 3 - 4 times a day

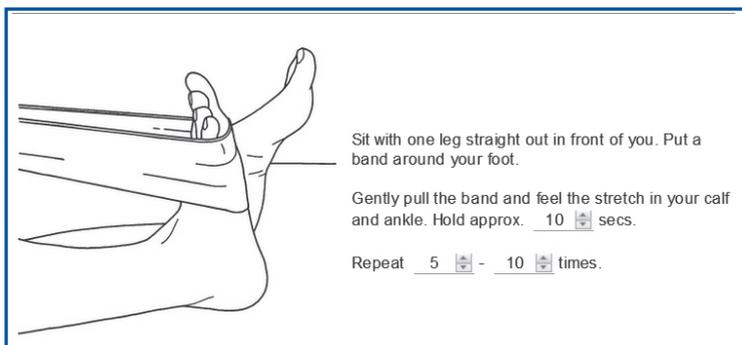
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Frequently asked questions:

● **When can I return to work?**

This depends on your job and what you do. For example, if you have an office job, manual job, or are reliant on driving. If possible you should talk with your employer and/or occupational health department to help with your return to work.

Your progress will be monitored by your consultant and physiotherapist who will help guide you to return to work as appropriate.

● **When can I return to driving?**

You need to be able to perform an emergency stop without significant pain to ensure you are safe to drive.

If the fracture is on your right foot and you drive a manual vehicle you will not be able to drive for 6 weeks as you will still be in a boot.

If your fracture is on the left and you drive an automatic vehicle you may be able to drive before this. However you should get advice from individual insurance companies before returning to driving. It is also recommended that you try on a quiet road with someone sitting in the car with you on your first attempt.

● **When can I return to exercise?**

You will be in your boot for 6 weeks and will begin physiotherapy around this time.

The physiotherapists will progress you out of your boot and work on your strength, range of movement and balance. They will tailor a home exercise programme for you and guide you back to the activities or sports you enjoy.

A standard time to return to sport is around 12 weeks after surgery. Be aware that you can still have pain and swelling from your ankle after strenuous activities for up to a year after your operation.

Who can I contact if I have any other questions?

You can speak to a physiotherapist by contacting **01273 696955** and ask for **bleep 8375** before your first appointment.

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Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

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