

COMMON COMPLICATIONS AFTER FOOT AND ANKLE SURGERY

Asymmetric Gait

While recovering from foot surgery you may walk asymmetrically (i.e limp) and this can cause disproportional loading of other parts of the body (hips, back, knee). This can lead to irritation of tendons, muscles and ligaments, which can be painful. This pain is usually self-limiting. Focused stretching and core strengthening during the recovery time can help this.

2. Swelling and numbness

This is VERY COMMON after foot surgery. You can expect this to last 6 months to 1 year depending on the type and complexity of the surgery you had, your age, weight and other medical problems. Most frequently this will resolve. Limb elevation, ice, compression socks and active range of motion can help with the symptom of swelling.

3. DVT (deep vein thrombosis)

This is a blood clot in the lower leg veins. It is relatively uncommon but can be a serious complication of foot surgery. Symptoms can include swelling and pain. Most blood clots do not cause significant or life threatening problems. Occasionally large blood clots can cause a condition called post thrombotic syndrome, which is a chronic swelling of the leg. Rarely a DVT can be a precursor to a pulmonary embolism (PE). A PE is a blood clot that travels to the lungs, this can be FATAL. If you have chest pain after surgery **YOU SHOULD GO TO THE EMERGENCY DEPARTMENT.**

The risk of a blood clot in foot and ankle surgery is about 1 in 100. Prophylaxis against blood clot formation can include medications to thin your blood. This medication will increase the risk of bleeding which can cause problems with wound healing and infection. For this reason prophylaxis is only used for larger foot surgeries or in people with risk factors for blood clots.

4. Failure to resolve all symptoms

Some pain may still be present even after successful foot or ankle surgery. It is important to appreciate that there are MANY different potential sources of pain.

5. Infection

Serious infections do not happen commonly. The risk of minor infection is about 1-3 in 100. Re-hospitalization and intravenous antibiotics may be required for serious infections however most frequently postoperative infections can be managed with oral antibiotics alone. People with diabetes, smokers and those who have had a previous infection in the area are at higher risk for developing an infection.

6. Nerve injury / neuritis

Numbness over the incision is VERY COMMON and will improve with time. A more serious problem is injury to a nerve that affects muscle or sensory control. This can occur when a nerve is placed under traction or when it is directly injured. The risk of nerve injury varies depending on the particular operation. A neuritis is irritation of a nerve that has not been completely injured. This can cause numbness or a burning sensation.

7. Delayed union / non union

Many foot and ankle operations involve fusing joints (arthrodesis) or cutting bones (osteotomies). If a joint has not fused or a bone has not healed in the expected time (usually 6-10 weeks) this is called a delayed union. Many delayed unions still go on to heal however it may mean limiting weight bearing longer than originally anticipated.

If no evidence of satisfactory healing has been demonstrated after a certain period of time this is called a non-union. Risk factors for non-union include **SMOKING, DIABETES, PREVIOUS NON UNION IN THE AREA, POOR BLOOD SUPPLY, INADEQUATE IMMOBILIZATION** (walking on your foot before you were told you could).

The rate of nonunion varies however in a healthy and compliant patient the literature would suggest a nonunion rate of 5-10% depending on the procedure. Most frequently no specific cause is found. If you have a nonunion you may require another operation to try to get your bone to heal.

8. Wound healing problems

Wound healing problems can include scarring and wound breakdown. SMOKING AND DIABETES is associated with a higher risk of wound healing problems.