

OSTEOTOMY OF THE TIBIA

Postoperative Recovery Protocol

Type of Procedure:	In-patient, one to two day hospital stay
Length of Procedure:	2 hours
Anesthesia:	General anesthesia with nerve block

Osteotomy of the tibia: What is it?

This is an operation which is designed to change the position of the leg bone (the tibia). Sometimes the smaller bone in the leg (the fibula) is also included in the surgery. This operation is performed to correct deformity of the leg, foot or ankle, but can also be used to assist with treatment for arthritis of the ankle. In order to perform the osteotomy, the bone is cut (an osteotomy) and the position of the leg is changed. The cut can be made either with or without a bone graft (which is obtained from the bone bank). There is a slight difference in the speed of healing when a bone graft is inserted, but if no bone graft is used, the leg is typically 6mm shorter. In order to hold the new position of the tibia, a metal plate and screws are inserted, which are usually permanent. Once the bone cut (osteotomy) has healed, they do not need to be in any longer, but we usually leave them in to save an additional operation.

Postoperative recovery: General factors

You will not be walking on the leg for about 8 weeks. In order to stay off your foot, you will need to use crutches, a walker, a wheelchair or a scooter type device called a roll-about. There will be a hard plaster bandage applied to the leg for two weeks after surgery. Your first follow up visit will be at approximately 2 weeks to remove the stitches. Either a removable boot or a short leg below the knee cast is worn for another 6 more weeks. If the surgery is on your left ankle, you should be able to drive an automatic vehicle at two weeks. If the surgery is on the right ankle, you may be able to drive between 3 and 4 weeks, but this varies. Exercises and movement of the foot and ankle are encouraged but without putting weight on the ankle at about 6 weeks after surgery. You will begin walking on the leg at about 8 weeks in a boot or cast. The cast is a little more reliable, since there is less movement of the ankle, but it creates a lot of stiffness of the ankle as well as shrinkage or atrophy of the leg muscles. You may begin to walk without the boot at about 12-16 weeks, depending upon your level of discomfort and bone healing. You should plan to use a physical therapist for about 2 months. An orthotic arch support is important for your recovery. The orthotic support will be made in our office following a computer analysis of the pressure of the foot. You should wear a stiff soled shoe for one to two months. Physical Therapy is helpful to regain the strength and movement of the ankle. You can expect to have some soreness and aching for about 4-6 months after surgery. There will be moderate swelling of the ankle and leg for about 6 months. You will continue to improve your strength and movement for about 9 months after the surgery.



Specific Post-Operative Course:

Day 1

1. Foot wrapped in bulky bandage and splint
2. Ice, elevate, take pain medication
3. Expect numbness in foot 12-24 hours then pain.
4. Blood drainage through bandage expected
5. Do not change bandage

Day 10-14

1. First follow-up in the office
2. Dressing changed and sutures removed
3. Placed in cast.
4. No weight bearing for 6-8 weeks

6-8 weeks

1. Cast removed
2. X-ray taken
3. Re-apply a cast, and occasionally a boot for 4-6 weeks
4. Full weight bearing is allowed
5. If a boot and not a cast is used then movement of the ankle is permitted

12-16 weeks

1. X-ray taken
2. If the bone (osteotomy) is healed, then walking in a shoe is allowed
3. An orthotic arch support is important for your recovery. The orthotic support will be made in our office following a computer analysis of the pressure of the foot
4. Start Exercise program and physical therapy
5. Therapy will continue for about two months
6. Exercise is important to regain the movement of the ankle and leg strength
7. Expect swelling in the leg and ankle for about 6 months

