

APOA Foot & Ankle Council Presents..

Case of the Fortnight

1st April 2022



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Presented by:



Dr. Michael Thomas T. Gonzales

Adult Orthopedics
Philippine Orthopedic Center
Manila, Philippines

Learning Points:

- © Neglected ankle fractures are debilitating injuries that require highly stable constructs.
- © Although an old implant, the angle blade plate is viable option for achieving stable fixation and fusion.
- © Proper fusion techniques and grasp of principles can and will lead to better outcomes

Title:

Ankle (Angle) Blade Plate

*Upcoming Case of the Fortnight
on 15th April 2022*

Presented by:

Dr Siu Wah KONG

Foot and ankle surgery,
Asia Medical Specialist,
Hong Kong SAR



Title:

A big osteochondral lesion of talus, how I treat it!

Want to present a case? Write to...



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Ankle (Angle) Blade Plate

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CASE

Clinical presentation

A 53 year-old female presents with a neglected and malunited trimalleolar fracture of her left ankle. She was involved in a motor vehicular incident 6 months prior when she was side-swiped by a tricycle. She consulted with an orthopedic surgeon and was advised immediate surgery. The patient was unable to comply for financial difficulties.

Clinical evaluation

Prior to surgery, the patient was ambulatory with assistive device and experienced pain on weight bearing. She also presented with pain on range of motion of the ankle and limitation in dorsiflexion of her left ankle. Subtalar motion, however was intact and pain free. Her leg musculature was also noted to be atrophied.

Treatment

Tibio-talar arthrodesis with lateral malleolus resection was performed using a posterolateral approach in prone position. Fusion was accomplished using an angle-blade plate. The blade length was cut to measure pre-operatively based on the size of the talus. Post operatively, patient was placed on a boot cast and allowed weight bearing with a walking boot 8 weeks after surgery.

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Fig 1.

Pre-operative left ankle radiographs showing a neglected trimalleolar injury. Shortened lateral malleolus, postero-laterally subluxed talus and osteopenia

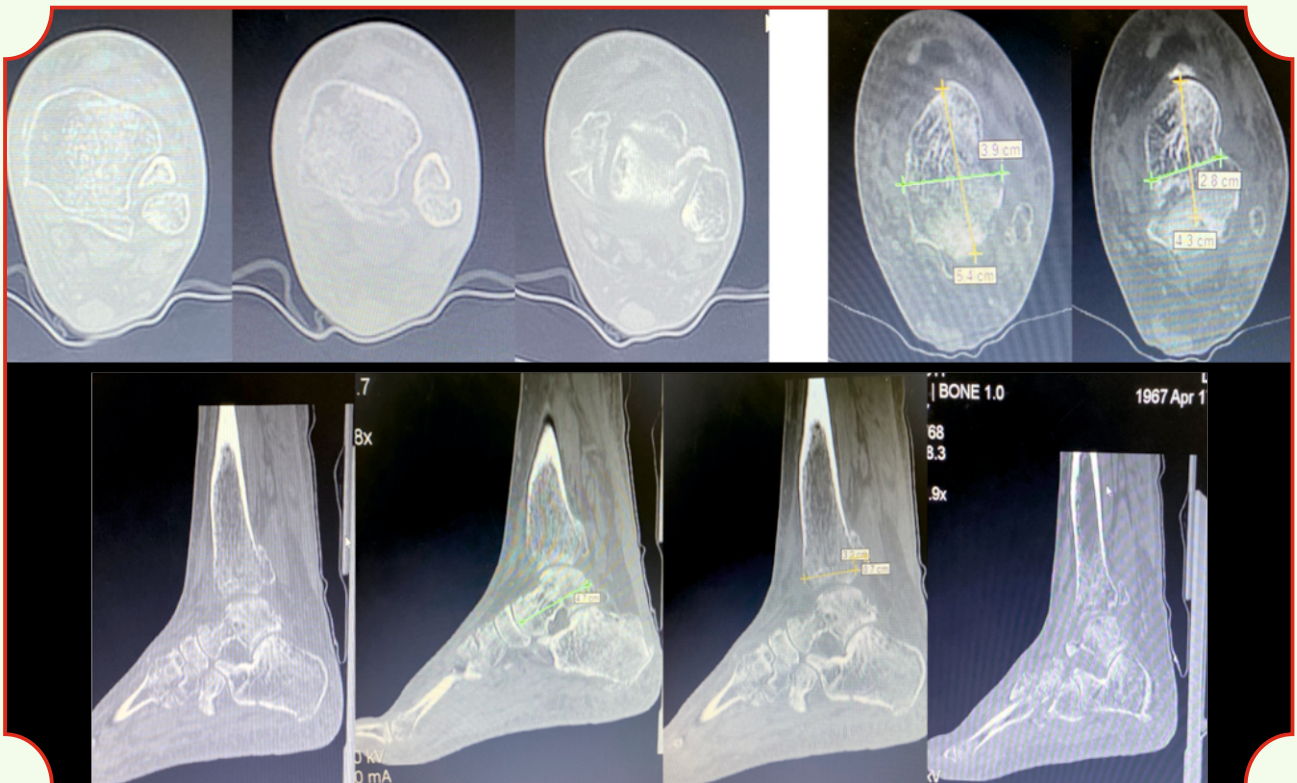


Fig 2.

Ctscan images highlighting the length of the talus and showing the fracture configuration

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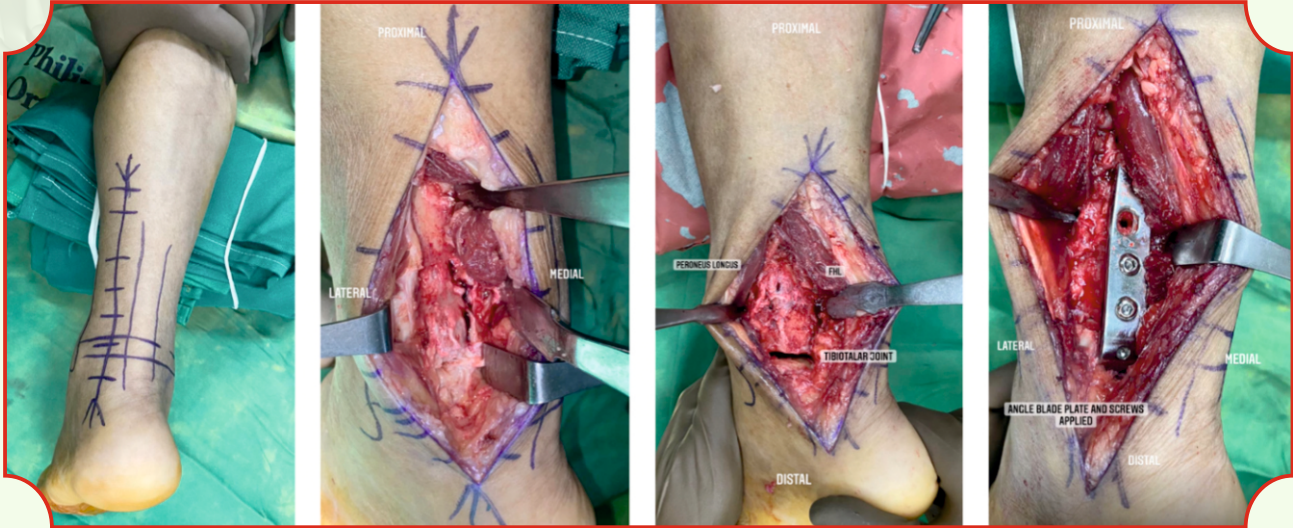


Fig 3.

Intraoperative pictures of the posterolateral approach and placement of the implant



Fig 4.

Intraoperative images showing Angle blade plate application thru image intensifier guidance

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Fig 5.

Post op ankle radiographs showing proper placement of the implant with the foot in neutral and slight external rotation



Fig 6.

1 month post operative radiographs

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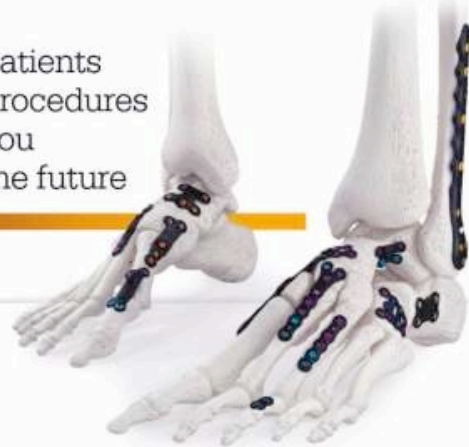
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