Ankle fractures

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Ankle fractures are very common. As with all intra-articular fractures one should strive for an anatomical reduction. Because of the biconvex saddle shape of the articular surface, small amounts of talar shift significantly increase joint surface contact pressures. It is useful to think of the ankle mortise as having three col umns: medial, lateral and posterior. Each column has a bony and a soft-tissue component. On the lateral side there are the lateral malleolus, lateral collateral ligament and syndesmotic ligaments. On the medial side there are the medial malleolus and medial collateral ligament (deltoid ligament). The poste rior column has the posterior syndesmotic ligaments attached from the lateral part of the posterior malleolus to the posterior lateral malleolus. If only one column (either the bony or soft-tissue compo nent) has been injured, then it is considered a stable injury and can be treated non-operatively with cast or splint protection f or 6–8 weeks. If both or all three columns are in volved or there is evi dence of talar shift, it is an unstable injury . Depending on the patient’s age and risk factors for wound complications, in gen eral unstable fractures are treated with open reduction and rigid fixation to hold the fracture anatomically . Non-operative treatment may be used for unstable fractures in elderly patients or patients with poor skin and unfavourable soft tissues, but this appr oach requires close observation and careful attention to casting technique. Jacques Lisfranc de St Martin , 1790–1847, Professor of Surgery and Operative Medicine, Paris, France. The os calcis injury is most frequently caused by a fall from a height. It is important to exclude associated injuries to the lumbar spine, which occur in 20% of cases. Most os calcis fractures involve the posterior facet of the subtalar joint. The severity of the injury is often best appreciated with CT scans (Figure 32.27). Treatment depends on the severity of the injury to the subtalar joint and widening of the heel leading to peroneal impingement. An os calcis fracture is a significant injury and outcomes following surgical or non-operative treatment are unpredictable. On occasion in severe injuries, primary fusion of the subtalar joint may be considered. Ankle fractures

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Revision #1
Created 2025-12-31 15:13:25 UTC by Omar Ayman
Updated 2025-12-31 15:13:25 UTC by Omar Ayman