ARTHROSCOPIC ANKLE FUSION





SETTING, PORTALS

SUPINE POSITION









SETTING, PORTALS

- ANTEROMEDIAL
- ANTEROLATERAL
- ACCESSORY PORTALS
- PERONEAL
 SUPERFICIAL NERVE











ARTHROSCOPIC STEPS

- 1: CARTILAGE REMOVAL
 - TALAR DOME, TIBIAL PLAFOND, GUTTERS
 - KEEP THE BONE SURFACE AND SHAPE
- 2: DRILLING, MILLING
 - SUBCHONDRAL BONE
- 3: FIXATION
 - ANKLE POSITIONING







































































CLINIQUE LA SAGESSE Dr SEVESTRE, F.Xavier 19/05/2010 10:21:19

narc, jean ×y









Dr SEVESTRE, F.Xavier

CLINIQUE LA SAGESSE

arthroscopie de

AVOID EQUINUS





















RESULTS

- AVERAGE FUSION RATE: 90%
- SFA 1998
 - FUSION: 87%
 - NON UNION RISK FACTORS
 - EXTERNAL FIXATOR (23%) VS SCREWS (9%)
 - TIBIOTALAR SCREWS ALONE (13%) VS TT +
 FIBULOTALAR SCREWS (3%)





RESULTS

- NON UNION RISK FACTORS

 OBESITY, TOBACCO, AVN
 RESIDUAL EQUINUS
- SHORTER DELAY OF UNION
 8.7 WEEKS VS 14.5 WEEKS





DIFFICULTIES

- SURGEON EXPERIENCE
- LONGER OPERATIVE TIME





PITFALLS

- RESIDUAL EQUINUS
- ANTERIOR TALAR TRANSLATION





INDICATIONS

- NO MAJOR BONE LOSS
- FRONTAL AND SAGITTAL DEFORMITIES
 - BASICALLY: <15°</p>
 - EXTENDED INDICATIONS
 - Cannon (foot ankle int. 2004)
 - Winson (JBJS B 2005)
 - FX Sevestre (SFA, GRECMIP)
 - Gougoulias (foot ankle int. 2007)
 - » 2 groups : A (48 < 15°) VS B (30 > 15° max 45°)
 - » Same 97 % fusion, axial correction in 2 groups
 - » Good release of the gutters









Frontal malalignment = asymmetric wear increased by a laxity in the convexity of the deformity

Reducibility can be easily appreciated by a dynamic radiograph preoperative



A partial reduction of the déformity must be completed by a gutters optimal release, with arthroscopic arthrolysis





IVERSITE DE VERSAILLE SAINT-QUENTIN-EN-YVELINE AMBROISE PARÉ

arthroscopic arthrolysis











Last difficulty at the time of fixation





Don't fall in the bone defect !!!







bone defect







CONCLUSION

- Majority of coronal deformities
 - BUT NOT AT THE BEGINNING OF YOUR EXPERIENCE !!!
- Importance of dynamic radiograph
- Technical difficulties:
 - If partial reducibility / arthroscopic arthrolysis
 - Don't fall in the defect at ostesynthesis time



