

Patient Information Sheet

- Mid & Hindfoot Fusions

What do I need to know?

What is my diagnosis?

You have foot arthritis. The mid-foot (talo-navicular & calcaneo-cuboid) and hindfoot (subtalar) joints allow us to walk on uneven ground. Arthritis is a process of wear and tear involving one or more of these joints. It is commonly due to a previous injury, fracture or malalignment of the foot joints. Patients with rheumatoid arthritis can also have arthritis of these joints. Pain commonly occurs when walking on un-even ground), together with stiffness, swelling and a sense of giving way.

What does foot arthritis look like on an X-ray?



Loss of mid & hind-foot joint space

Do I need an operation?

You should have initially tried non-surgical treatments in the form of footwear changes, cushioned inserts, activity modifications to limit impact activities, braces, anti-inflammatory medications and walking aids. This operation may be offered to you if you continue to have symptoms despite these non-surgical treatments. You will be examined and counseled by a healthcare professional who will explain the risks and benefits of surgery to you. The operation is usually offered in severe cases of arthritis of these joints.

What does the operation involve?

The operation is performed as a day case procedure but come prepared in case you need to stay overnight. The operation is carried out under a general anesthetic & nerve block (numbing the nerves of the foot and ankle). The operation involves two incisions (cuts) over the sides of the ankle / hind-foot. The remaining cartilage covering the joint surfaces is removed and the two ends of the joint are fixed using screws, plates & screws or metal staples/wires. Your leg is placed in a plaster for a total of 12 weeks after the operation.

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What happens after surgery?

You will see a physiotherapist after surgery who will give you crutches. You must elevate the leg for the first two weeks. You cannot put any weight on the operated leg for six weeks. Your stitches will be removed after two weeks, and a new plaster applied. You will be instructed to mobilise non-weight bearing for the first six weeks, and full weight bearing after that. You will be off work for around 12 weeks and off driving for 12-14 weeks.

What will my fusion look like?



The mid- and hind-foot after fusion with staples and screws

What about blood clots after surgery?

You could be prescribed anti-coagulants (blood thinning medication) after surgery. Your risk of having a blood clot will be assessed by your healthcare provider. You may be asked to take a daily tablet or have subcutaneous (under the skin) injections, depending on your level of risk. You will be shown how to self inject in this situation.

Are there potential complications?

Every operation has potential complications. You must understand these before having surgery. These include but are not limited to:

- Ongoing pain
- Failure of bone healing (non-union)
- Sensitive or painful scarring
- Infection
- Clots in the leg (DVT)
- Clots in the lung (PE)
- Chronic regional pain syndrome

Smoking, diabetes, rheumatoid arthritis, steroids and blood thinning medication increase these risks significantly. Discuss these in more detail with your healthcare provider.