Living with an Ilizarov frame

Trauma and Orthopaedics

We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.

To use the Text Relay service, prefix all numbers with 18001.

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Website: www.ashfordstpeters.nhs.uk

Patients first • Personal responsibility • Passion for excellence • Pride in our team
Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.
Further Information

For further advice  Monday – Friday 09:00-16:00

Telephone: - 01932 872000  Ext: 3646 to speak to Tracey Robinson, Rowley Bristow Unit Sister. Or via the hospital bleep system (5204) and ask for Hazel Watters Orthopaedic Trauma Practitioner. Out of these hours 01932 872000 and ask for the Orthopaedic Registrar on call.

Ilizarov and external fixator wearer support group, can be found on www.ilizarov.org.uk/index1.htm
Additional information which you maybe given at your outpatient visit by the Surgeon in charge of your care.
This is to be used if your frame requires adjusting. The Surgeon in charge of your care will inform you if this is required.

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<tr>
<th>Date / Day</th>
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What you need to do to look after your pin sites

There are 3 categories into which pin sites fall
It is important that you check your pin sites every day for signs of irritation or infection

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
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<tr>
<td>1. Calm or good</td>
<td>• This is a healthy pin site which is not inflamed it is dry and resembles a piercing</td>
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<td>• It is not red, swollen or painful</td>
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<td>2. Irritated and infected</td>
<td>• It is often difficult to distinguish between an infected pin site and an irritated pin site.</td>
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<td>You may have bacteria on your skin which is causing some irritation but the pin sites are</td>
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<td>not infected</td>
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<td>• There may be pain where the pin meets the skin, slight redness around the pin site if</td>
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<td>there is oozing it will be clear straw coloured</td>
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<td>3. Ugly or infected</td>
<td>• The pin site is painful inflamed and is heavily discharging franc puss</td>
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<td>• Redness may spread across the skin</td>
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<td>• Your limb may become more swollen</td>
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DISCHARGE CHECK LIST

1. PINSITE CARE: A small supply of dressings and equipment will be given to you on discharge from hospital:
   - Biotaine dressings
   - 1 packet of gauze swabs for cleaning
   - 1 Dressing pack
   - 1 Pair of sterile scissors

2. CLEANING SOLUTION: This will be prescribed and given to you on discharge with your other medications:
   - 1 bottle of Chlorhexidine solution 0.5%

3. COURSE OF ORAL ANTIBIOTICS: These will be prescribed: Flucloxacillin 1 gram
   - 14 days’ supply (unless allergy to Penicillin)
   - These are to take if you develop a pin site infection.
Wearing frame covers will also help keep your frame and pin sites clean from ‘everyday’ dust and dirt.

Physiotherapy

1. To prevent muscle shortening, joint stiffness and muscle wasting developing, it is important to carry out daily exercises. Your physiotherapist will instruct you and when to do these. You will start these exercises whilst you are in hospital and a home exercise programme will be given to you prior to discharge.

2. Try to use the limb with the Ilizarov frame on as normally as possible.

3. As you have been advised to weight bear on the leg with the Ilizarov frame it is important to do so as weight bearing helps the bone to heal more quickly – and thus reduce the time the Ilizarov frame can be removed.

4. An outpatient physiotherapy appointment will be arranged for you and details of your physiotherapy program will be sent with the referral.

Your personalised exercise plan, which will be completed by the physiotherapist.

Pin-site care:

You will be shown how to care for your pin sites during your stay in hospital prior to discharge.

Weekly routine pin site care is as follows:

1. Wash your hands.

2. The dressings around the pin sites will be removed 48 hours following surgery, this will allow the pin sites to be checked and redressed.

3. Weekly cleaning and showering starts 48 hours after surgery. At home this can be with a shower attachment or a jug of water over the bath. DO NOT put the frame in a bath of water as this could lead to infected pin sites. Use your own towel even at home.

4. You can only shower your limb weekly. After showering, dry off the excess water from your limb and the frame with a clean towel. It is not necessary to dry around each pin site.

5. Shower gels or perfumed soaps can be used for general showering, but please do not use these products to clean your pin sites.

6. During the first few days after the application of an Ilizarov frame expect clear yellow or slightly bloody drainage from the pin-sites, you may therefore see a small amount of marking / staining on the dressing this is normal.
7. Clean pin sites weekly after showering with a clean piece of gauze, soaked in Chlorhexidine antiseptic solution, each piece of gauze should only be used once and then thrown away. A bottle of Chlorhexidine antiseptic solution will be prescribed for you on the ward.

8. All pin sites should be dressed with a foam dressing, for example, Biotaine, the dressing should then be secured with a plastic clip.

As you are less active you may gain weight, try and reduce cakes, sweets and crisps.

You may become constipated; this is not unusual when you are less mobile and taking regular painkillers, to prevent this you should increase your fibre and fluid intake.

Clothing

This can be a problem as leg frames can be bulky - a normal pair of trousers will not fit over them.

For arm Ilizarov frames – large ‘stretchy’ T shirts can be very useful.

Skirts, pants, jeans, shorts can be adapted by splitting the seam on the affected side and attaching Velcro or press studs to the seam, this can make it a lot easier to dress.

Frame covers

Many patients’ feel the cold through their frame during the winter months – having a frame cover can help to insulate your limb.

Use a piece of warm fabric for example fleece or quilted material which you can tie around the frame.

Your limb and Ilizarov frame should also be protected from the sunlight as the heat from the sun can be conducted through the wires of the frame.
For additional information regarding your Ilizarov frame, log onto our website www.ashfordstpeters.nhs.uk, then simply click on to A-Z departments, and then limb reconstruction.

**Living with your Ilizarov frame**

Your frame will be in place for many months; remember that it is temporary.

All activities of daily living will take longer – therefore remember to be patient and allow time to avoid getting frustrated.

It is important to keep active – ensure you continue with social activities, it may even be possible for you to return to work or college – it is important not to become isolated and depressed. Keep your mind busy – reading books etc.

Maintain your normal life as much as possible and keep to your normal sleeping pattern.

If you feel very low in mood remember your frame is temporary and concentrate on the long terms benefits. If you continue to find living with your frame difficult you should seek help via your GP.

**Diet**

To promote bone and wound healing it is important that your diet is rich in protein, calcium and Vitamin C.

If you lose your appetite – milk and milky drinks will increase your nutritional intake. Try small meals with snacks – remember to include a variety of foods.

9. Biotaine and gauze dressings should be cut to size prior to placing them around the pin site. The nurse will show you how to do this on the ward prior to your discharge.

10. Dressing should be held in place with a clip as this allows slight compression to the pin site, the benefits are:

   - It prevents the skin forming a tent shape around the pin site known as ‘tenting’
   - It reduces the movement at between the skin and pin site when mobilising
11. If crusts form (yellow in colour) they should be removed to allow exudate to drain and allow for observation of the wound around the pin-site. This should be done immediately after showering and cleaning.

12. If you have scabs (scabs are usually dry and dark red or brown in colour) then we recommend that these should be left alone and allowed to fall off naturally.

13. **DO NOT** apply any cream or other antiseptics to the pin sites.

14. This routine should help reduce pin site infections; however you may still get a simple pin site infection.

15. **Chlorhexidine antiseptic cleaning solution, Biotaine dressings,** should be obtained from your GP. Gauze for cleaning can be bought from a chemist or obtained via your GP.

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### BORKEN WIRE / LOOSE WIRE

1. If you experience a broken wire, rest at home and contact the Rowley Bristow Unit, during clinic hours. Monday – Friday 08:00-16:00 hours 01932 872000 Extension: 3646

2. Loss of tension in wire and loosening of pins may cause pain, inflammation, redness, discharge and infection. Broken wires can be stabilised in clinic, however it may be necessary to replace the wires, this will require you to go back to theatre to have them exchanged.

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### When to Contact your GP

- If you develop a pin site infection
- If your pain is not adequately controlled
- If you are feeling low and not coping with living with your frame

### When to Contact the Hospital

- If you have not responded to oral antibiotics for a pin site infection
- If you experience a broken wire
- If you experience loss of tension in a wire or any loosening of pins

### When to go to Accident and Emergency

- If you a feeling unwell and feverish
## PROBLEMS

### INFECTION
Can cause serious complications these include:

1. **Osteomyelitis** – infection in the bone.

2. Delay in the fracture from healing – which can lead to having to wear the Ilizarov frame for longer an alternative treatment plan.

3. **Non-union** – the fracture not healing.

4. Loss of fracture alignment – the fracture not healing in the correct position.

5. **Amputation**.

6. **Systemic infection** – This is extremely rare an infection that affects the whole body, not a local infection for example a pin site infection.

### FAILURE TO TREAT PIN SITE INFECTION CAN LEAD TO:

1. The development of a deeper infection.

2. Loosening of the pin.

3. Loss of fixation or stability of the Ilizarov frame.

4. **Osteomyelitis**.

## PIN SITE INFECTION

### OBSERVE FOR SIGNS OF INFECTIONS AROUND THE PIN SITES, THESE INCLUDE:

1. **Pain** – that is out of proportion of any pain you normally experience around the wire and reduces your mobility.

2. **Redness** around the pin sites, that is spreading (some patients find the pin sites are often red, others do not).

3. **Swelling, Heat and Tenderness**.

4. Visible drainage of pus, thick fluid, discharge of straw coloured fluid is not indicative of infection.

5. **Feeling unwell** – flu like symptoms

If you develop a pin site infection – it will be necessary to increase the frequency of pin site cleaning and dressing. You may have to clean the infected pin sites daily, with the Chlorhexidine 0.5% antiseptic cleaning solution and change dressings as required (this will depend on how much the pin site is oozing).

You will be discharged home with a course of oral antibiotics (Flucloxacillin 1 gram for 14 days, unless you have a penicillin allergy) You must only start taking the prescribed antibiotics if you develop a pin site infection.

Some patients find they require several courses of antibiotics during their treatment. If you think your pin sites have become infected again consult your GP, immediately; they will prescribe antibiotics if necessary.

### SWELLING

1. Postoperative swelling can last for 4 weeks or longer. If your limb becomes swollen after this time, it could be a sign that you have done too much. Ensure you rest and elevate your leg (preferably higher than your heart) NB. Note – your limb may not return to the original size during treatment.
PAIN MANAGEMENT

1. Cleaning the pin sites and adjusting the frame should not be painful. Pain may be worse at night or when the skin or nerves are stretched.

2. To help you get the best possible pain relief, we recommend that you take your prescribed painkillers regularly.

3. Most patients will be prescribed regular pain killers when they go home. Your GP will be informed of your medicines but if you feel your painkillers are not working speak to your GP or contact the Acute Pain Service at the hospital for advice.

4. You must not take any medicines classed as ‘anti-inflammatory’ drugs (such as Ibruprofen, Nurofen or Diclofenac.) as there is evidence that this can delay bone healing.

VITAMIN SUPPLEMENTS

There is some evidence that Vitamin C and E help prevent pain and stiffness (complex regional pain syndrome) after injury. They may also help the articular cartilage to repair.

We recommend you buy from a local Chemist:

- 1g of Vitamin C to take daily for 3 weeks
- 1gram of Vitamin E to be taken daily for 3 weeks

No side effects have been reported in taking these vitamins.

SMOKING

1. IF YOU SMOKE: IT IS IMPORTANT TO STOP NOW!

2. Smoking delays bone healing, up to approximately 30%, therefore smoking reduces the likelihood of your treatment being successful.

MOBILISING

YOU DO NOT REQUIRE SPECIALIST PHYSIOTHERAPY. YOU MUST MOBILISE FULL WEIGHT BEARING AS SOON AS POSSIBLE.

THE QUICKER YOU CAN SAFELY WALK WITHOUT CRUCHES THE BETTER IT IS FOR YOU.

1. Fully weight bearing encourages the bone to knit

2. Initially you will be taught to walk with aids (crutches or a frame) these will be provided. BUT It is VITAL that the use of aids is discontinued as soon as possible so that all the weight is borne by the leg and the frame.

3. The frame is removed once you can walk without aids and pain, as this suggests that the bone may have healed.

WALKING is important to your recovery and ...

- will help reduce the swelling in your leg
- will help stop your joints from becoming stiff
- reduces risk of developing a blood clot
- helps to stop boredom
- it can be indoors or out doors
- one cannot overdo walking