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Ankle Arthritis

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What is ankle arthritis?

Ankle arthritis can cause pain, stiffness and swelling of the ankle. It occurs when the cartilage, which covers the ends of bones at joints, becomes damaged.

Cartilage usually works as a shock absorber and reduces friction during movement. When it is damaged or worn, it can lead to bone rubbing directly against bone, causing pain. Extra pieces of bone can also form around the joint, as well as scarring of the joint lining, with both processes resulting in joint stiffness and swelling.

What causes ankle arthritis?

In many cases there is no clear cause, however there may be a family history of similar issues.

It can be caused by rheumatic conditions, such as rheumatoid arthritis or gout. In these conditions you may find you have other joints affected also.

Previous ankle injury, such as ankle fractures, can increase your risk and is a common cause.

Non-surgical treatments

Before considering surgery there are many factors to address which can improve your symptoms.

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.

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Useful Links

British Orthopaedic Foot and Ankle Society (BOFAS)

<https://www.bofas.org.uk>

Offers a list of all surgeons carrying out specialist foot and ankle surgery across the UK as well as patient information.

Arthritis Research UK / Versus Arthritis

<https://www.versusarthritis.org/>

Phone: 0300 790 0400

Offers a wide range of information and articles as well as a selection of self-help booklets which can be downloaded on the Internet.

National Rheumatoid Arthritis Society (NRAS)

<https://www.nras.org.uk>

Phone: 0845 458 3969

Helpline: 0800 298 7650

Email: enquires@nras.org.uk

Provides information and support for people with rheumatoid arthritis (RA) and juvenile idiopathic arthritis (JIA), their families, friends, and carers.

Excess weight

Being overweight or obese puts increased stress on your ankle joint. It increases your risk of arthritis as well as exacerbating (worsening) your symptoms.

Physiotherapy & exercise

Physiotherapy can help build the strength of the muscles around the ankle joint. This can take some strain off the ankle joint, as well as reduce your risk of injuries going forward.

Footwear modification

Supportive shoes / boots or insoles may help. Some patients find ankle braces effective.

Activity modification

Avoid running and carrying heavy loads during flare-ups. A walking stick can also help.

Medication

Simple painkillers such as paracetamol and ibuprofen can reduce your pain.

You can also have steroid and local anaesthetic injections into the joint which can be very effective at providing temporary relief.

Surgical treatments

If the above measures fail to control your symptoms, then surgery may be an option. There are several surgical treatment options available, and your surgeon will help you to make the choice that is best for you.

Keyhole surgery (arthroscopy)

This may be helpful in the earlier stages of arthritis, or when bone is blocking movement.

Fusion (ankle arthrodesis)

This means the bones in the ankle are permanently joined together. This can be performed as keyhole surgery or open surgery, and usually involves removal of the damaged joint surfaces, with the bones held together using screws whilst the bones fuse together to become one.

This surgery converts a stiff and painful joint into a stiff but pain-free joint. It is an effective option for pain relief and most patients with a successful ankle arthrodesis can eventually walk without a limp and do certain sports such as cycling or golf.

Ankle replacement

This involves replacing a worn-out ankle joint with metal and plastic components, similar to hip and knee replacements. This gives good pain relief and function, but like all joint replacements they can wear out.

When is an arthrodesis more suitable than a replacement?

If you are under 50 years old and active, most surgeons would recommend an arthrodesis (fusion) as the longer-term results of replacement in younger patients are unknown.

If you have severe deformity or instability, or if you have severe muscle weakness, then an ankle replacement is not recommended.

What are the risks of surgery?

- Persistent pain or stiffness in the ankle
- A blood clot in the leg (deep vein thrombosis) (low risk)
- Infection (might require surgery if the infection is deep)
- Rarely the bones do not unite or join in a poor position, which may require further surgery
- An ankle replacement may loosen or wear and revision surgery may be required