Ankle arthrodesis for salvage of Chopart- amputations with anterior soft tissue problems

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My disclosure is in the Final AOFAS Programm Book. I have no potential conflicts with this presentation.
In Chopart-level amputations the heel inevitably collapses into equinus and varus because of imbalance of the tendons.

This stretches the anterior soft tissues and moves the typically anterior scar plantarly, close to or into the weightbearing zone.

As a result wound dehiscence or ulceration may occur, jeopardizing the stump’s salvageability.
Introduction

- Ankle arthrodesis is a valuable option to assure wound healing in patients with Chopart- amputations and preoperatively already existing anterior soft tissue problems.

- Reduction of the hindfoot position and stabilization with an ankle arthrodesis relieves the anterior tension allowing for wound closure and undisturbed healing.

- Furthermore the scar is moved away from its problematic position.\(^2,3,7\)
Method

> Between 1998 and 2009 12 patients (seven female, five male, average age 59 years) were treated with a Chopart amputation for trauma (4), tumor (2), gangrene, infection and ischemia (6)

→ to prevent woundbreakdown an ankle arthrodesis was added

> Last follow-up in 2011 with using 2 scores:
  1. AmpuPro-score (questions about pain, activity of daily living, prosthesis handling, max. 120 points) 8

> 2. Legro Prosthesis Evaluation Questionnaire scale (focus on prosthesis function, mobility, psychosocial experience, well-being, max. 200 points) 4
Results

- average follow-up of 27 months (13 – 63)

- 2/12 woundbreakdown (2 infection and ischemia) → below knee amputation

- 10/12 successfully treated without major complications and fitted with a prosthesis

- average AmpuPro-score: 107 (max 120)

- average (Legro) Prosthesis Evaluation Questionnaire scale: 147 (max 200)
Results

- Walking capacity:
  - “physiological walker” in one patient
  - “household walker” in three
  - “limited community walker” in four
  - two patients were “full community walker”
Results

> Radiographically, ankle fusion was achieved in all cases
Conclusions

> Ankle arthrodesis is a valuable option to assure wound healing in patients with Chopart- amputations and preoperatively already existing anterior soft tissue problems

> It adds little to the operative procedure, and a conversion to a higher level amputation is avoided in the majority of cases
References

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