Treatment of Unstable Charcot Ankles using Ilizarov frame

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• Treatment of Unstable Charcot Ankles using Ilizarov frame
  • Dr. Ali Darwishe
  • My disclosure is in the
  • Final AOFAS Mobile App.
• I have no potential conflicts with
  • this presentation.
Introduction

The diabetic Charcot ankle is a potentially limb-threatening disorder that is being recognized with increasing frequency in persons with longstanding diabetes and concomitant peripheral sensory neuropathy. The main problems encountered in this process are osteopenia, fragmentation of the bones, joint subluxation or even dislocation, ulceration of the skin, and development of deep sepsis and osteomyelitis. Arthrodesis using an Ilizarov frame is regarded by some authorities as an optimal choice for the treatment of Charcot arthropathy.
Methods

• In order to investigate the application of the Ilizarov frame for the treatment of unstable Charcot ankles in Qatar a prospective study was conducted. Operable patients with unstable diabetic ankle arthropathy are considered. Study site in Hamad General Hospital. The study done in several patients and still under processing.
Case presentation
65 year old female patient complaining of bilateral ankle and foot deformity R>L, unable to put weight for the last 3 years
Clinically Severe ankle and foot deformity, talus almost gone, with severe fragmentation of the med foot
PROCEDURE

• Application of Ilizarov frame
• 4 cm skin incision and underlying soft tissue lateral aspect of foot, over the subtalar joint
• Disarticulations
• Compression technique, axial tibio-calcaneal, and sagittal calcaneo-cuboid and tibio-navicular joints
Result

• The Ilizarov frame was removed after 5 months
• The patient was able to put weight, first day after surgery.
• One year after surgery the arthrodesis maintained.
• Patient walking, satisfied, asking to do the left side.
Conclusion

• Ilizarow frame found to be useful in our patients sitting.
• It has the advantages of
  Avoidance of higher risk soft tissues or ulcerated skin
  The option of controlled compression
  FWB ambulation from the start
References

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