

Child health information factsheet

Subtalar fusion

The subtalar joint is between the two bones in the ankle and the heel, the talus and the calcaneus. Your child needs an operation to stabilise this joint which should resolve your child's pain and prevent wearing of the joint.

The subtalar joint is fused (joined) together using a screw between the two bones.

Your child will need a general anaesthetic (medicine given to make you go to sleep) for this operation.

There will be two scars, one on the outside of the foot and one on the heel.

Aftercare

Your child will be in hospital for two nights after surgery. The leg will be placed in a half plaster cast (back slab) after the operation and the physiotherapist will teach your child how to move around with crutches without taking weight through the leg.

Your child will be seen in the clinic two weeks after the operation. The wounds will be checked and a full plaster will be put on for four weeks. Weight must still not be taken through the leg but your child will be able to rest it on the floor for balance.

Six weeks after surgery, the plaster will be removed and changed for a walking boot. This needs to be worn in the day when walking around but can be removed when having a bath and when resting at night.

Three months after surgery an x-ray will be taken to check to see if the bones have fused. If this is satisfactory, the boot will no longer be needed and normal shoe wear can be worn. An orthotic (insole) may be needed.

Physiotherapy may be needed to help with rehabilitation.

The full recovery time will be about nine months but in the last three months your child will be mobile and should have few problems.

It is a good idea to contact your child's school to discuss any support they may need.

Possible complications

The healthcare team will make your child's stay in hospital and the treatment they receive as safe as possible. However complications can happen. You should ask the healthcare team if there is anything you do not understand.

The anaesthetist will be able to discuss with you the possible complications of your child having an anaesthetic.

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Pain relieving medicine will be given as prescribed by the anaesthetist or the doctor. It is important to keep the foot raised after surgery to reduce swelling which can cause more pain.

Bleeding can happen during or after surgery.

If the surgical wound becomes infected it will usually settle with antibiotics but may sometimes need further surgery.

Scarring of the skin may occur as a result of the surgical cut.

There may be altered feeling at the operation site, this may be temporary or permanent.

Specific complications

The risks of surgery include infection, bleeding into the wound, nerve injury resulting in altered feeling along the foot, failure of fusion and continuing pain.

The chances of complications are small, less than 1%, although the risk of the fusion not joining is between 5% and 10%. If this was to happen another operation may be needed.

If you have any questions or concerns please contact

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