Ankle Fractures

University of Maryland Upper Chesapeake Health

Ankle fractures often occur after twisting injuries. A slip on the ice is a common occurrence that can lead to an ankle fracture. Ankle fractures can also occur traumatic events such as falls or motor vehicle accidents. The fracture or 'break' typically involves the fibula and/or the tibia (bones of the ankle joint) and are often associated with damage to the ligaments stabilizing these bones.

Ankle fractures typically occur in characteristic patterns depending on the position of the foot/mechanism of injury. Some fractures can occur without disruption of the ankle joint/displacement of the bones (non-displaced fractures), while other injuries lead to gross shifting of the facture fragments/alignment of the joint. At times the injury is significant enough to cause the joint to dislocate.

Some ankle fractures can be treated without surgery if the bony fragments are in overall good alignment. These patients can be managed in a cast or possibly a removable boot or Cam walker. There are other patients who may have a fracture with a small amount of displacement or shift of the bones. Special x-ray tests will typically be done to determine the stability of the injury. If the injury is stable (minimal shift of the bones) then a non-operative treatment course is recommended.

Displaced ankle fractures and ankle fractures in which the joint has dislocated typically require surgery. The goal of ankle fracture surgery is to return the bones of the ankle to their anatomic or pre-fracture position, while bone fragments are held in position with plates screws or other metal implants. At times, the ligaments damaged during the injury are repaired or stabilized/reinforced. This surgery typically takes 2-3 hours in the operating room, and most patients are able to go home after surgery. Nerve blocks are typically performed providing good pain relief following surgery.

Recovery from ankle surgery includes initial immobilization in a splint (placed in the operating room). Most patients are placed into a cast at their post-operative appointment and are kept non-weight bearing for at least 6 weeks after surgery. Crutches or a knee walker are required. Once the fracture has healed adequately (usually at 6 weeks post-surgery) the patient may start weight bearing in a removeable boot. Physical therapy is started when the cast is removed.

To make an appointment with Dr. Zell, please call 443-643-3130.