



STAR[®] ANKLE

TOTAL ANKLE REPLACEMENT



ANKLE REPLACEMENT IN PRESENCE OF PREVIOUS TRIPLE ARTHRODESIS WITH RESIDUAL HEEL VALGUS

By David Thordarson, MD – Los Angeles, CA

INITIAL PRESENTATION

A 53-year-old female with a 20+ year history of intermittently controlled rheumatoid arthritis presented with history of ankle pain, the right significantly greater than the left. She had a spontaneous fusion of her subtalar joint.

In addition to being on rheumatoid DMARD medication, multiple ankle braces and steroid injections in both ankle joints provided only minor temporary relief.

The patient's medical history includes a Clayton resection arthroplasty of MP joints on the operative foot. Per a clinical exam, she had 10° dorsiflexion and 20° plantarflexion. When standing, her heel is in approximately 18° of valgus.



Pre-operative radiographs

INTRAOPERATIVE

The patient had mild valgus ankle alignment. After implanting the STAR® Ankle and correcting the 5° of ankle valgus, the heel was still in 12-15° valgus due to a malpositioned triple arthrodesis. A medial slide calcaneal osteotomy with approximately 1.2cm of medial shift of the tuber was used to correct the deformity.

POST-OPERATIVE

The patient is ambulating without limitation due to right ankle pain but still has some left ankle and right foot pain. The patient's pain is not severe enough to warrant further surgery at this time. The patient has 15° dorsiflexion and 40° plantarflexion. Her heel position when viewed standing is 7-8° valgus. She has no localized tenderness on this side.



1-year post-op xrays showing STAR ankle replacement and medial slide calcaneal osteotomy.

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T 800.495.2919 F 877.778.3864

Trilliant Surgical, LLC
727 North Shepherd Drive, Suite 100 | Houston, TX 77007 | U.S.A.
enovis.com/foot-and-ankle

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