Rehabilitation Protocol
Foot Fusion

What to expect after foot fusion surgery
Foot fusion surgery is when separate bones in the foot are permanently joined together (fused). It can be used to treat arthritis (including rheumatoid arthritis), flat feet and fractures that haven’t healed naturally, or that are caused by long term deterioration of bones and cartilage.

Midfoot fusion can involve one or two bones being fused, or all of the midfoot joints that form the arch of the foot.

Hindfoot fusion can involve permanently fixing the subtalar and Chopart joints (which is made up of the talonavicular and calcaneocuboid joints) to treat hindfoot arthritis.

This leaflet tells you what to expect as you recover from having foot fusion surgery. However, everyone is different and your recovery may be different from other people’s. Please contact Mr Heidari if you are worried about any aspect of your recovery.

Immediately after your operation
When you wake up your foot will be in a plaster cast to the knee, which will stay on for up to 12 weeks after surgery. Your foot will be numb and pain-free (from a local anaesthetic injection around the affected area). When you have recovered from the anaesthetic, you’ll be shown how to walk using crutches, keeping weight off the foot and you’ll be given some exercises to help maintain muscle strength and flexibility. In most cases, you’ll be given painkillers to take for a few days and offered a follow-up appointment with Mr Heidari. Most people can leave hospital the same day as their surgery or the day after, depending on your general health, and how quickly you recover from the procedure.

The day after surgery

- You’ll be able to walk using crutches when you need to, but try to rest your foot as much as possible
- Keep it elevated (raised above the level of your heart) whenever possible
- The local anaesthetic will start to wear off, so you may experience more pain
- Continue taking your painkillers as advised by Mr Heidari
- Avoid smoking and taking anti-inflammatory medications as this may delay or even prevent the bones from fusing together
Day 1-7

- It’s important to keep your weight off the foot
- Try to rest as much as possible, with your leg elevated
- By the end of the first week you should have significantly less pain

Day 8-14

- You should be starting to feel better, but try to keep weight off your foot
- Keep your foot elevated as much as possible
- You should be able to walk short distances at home and get in or out of a car, using your crutches but without putting any weight through your foot
- You may be able to return to work if this involves working from home, but try to keep the foot elevated whenever possible

Week 2-6

- During this time, you’ll have a follow-up appointment, during which your wound will be checked
- Your stitches will be removed and you’ll have an X-ray to check that the bones are healing correctly
- You’ll be given a new lightweight cast
- You’ll still be using crutches and you should continue to keep weight off your foot

Week 6-12

- At this stage you’ll have another follow-up appointment
- You’ll have an X-ray to check the bones are healing correctly and be fitted with a surgical sandal so that you can start to put weight on the foot
- When you start to return to work, try to do this in phases, travelling outside of the rush hour if possible to start with. However, if you have a heavy manual job, it can be up to six months before you can return to work
- Try to keep your foot elevated as much as possible when you are sitting down
- If the operation was on your left foot, you should be OK to start driving an automatic car if advised by Mr Heidari, but always check with your car insurance company first
• You may be referred for physiotherapy

• Scar massage: gently massage the area around the scar as much as possible. The scar may be sensitive and more painful in some areas but it’s important to continue to desensitise the scar and prevent adhesions (tissues sticking together). Try to do this for a few minutes at least twice a day

**Week 12 onwards**

• At this stage you’ll have another **follow-up appointment**

• Your joints should have fused completely

• You should be OK to start driving a manual car, if advised by Mr Heidari, but always check with your car insurance company first

**Six months after surgery**

• You’ll have a **final review** with Mr Heidari sometime between 3-6 months after surgery

• You should be able to return to your normal sporting activities, with a good level of activity which will continue to improve up to 12 months

• You may have some swelling for up to a year, after which healing should be complete

**Exercises**

Carrying out these regular exercises after your foot fusion surgery is essential to prevent stiffness, restore your range of movement and help you return to your everyday activities as quickly as possible. It’s not possible to cause damage to your foot by doing these exercises, although it may feel a little uncomfortable to begin with. However, the more regularly you carry out your exercises, the better the results will be.

**In the first 2 weeks**

• You’ll be advised to move your toes as much as possible in the cast

• You can exercise the rest of your body by doing gentle stretching and core stability exercises. Your physiotherapist will show you these

**Week 2-6**

• Exercises will focus on strengthening the muscles in the foot without affecting the fused joint (isometric exercises).

• You should continue with exercises to maintain your fitness and tone
If all the wounds have healed, we can consider removing the cast early to allow you to do some hydrotherapy.

**Week 6-12**

You may be fitted with an orthotic arch support to wear in your shoes and be given ankle exercises including:

- Isometric ankle exercises (with or without resistance bands): these exercises involve strengthening the muscles in the foot without affecting the fused joint - for example, moving your foot up and down
- Foot strengthening exercises: for example, picking up a tissue using your toes
- You can gradually begin low impact gym work such as walking, using an exercise bike or cross-trainer

**Three months onwards**

Physiotherapy will focus on restoring full movement in your foot and ankle and helping you to walk normally, as well as regaining your balance and general fitness so you can return to your usual sporting activities.

- You’ll be encouraged to gradually reduce the time you wear the surgical sandal each day, wearing your normal shoes for longer periods
- You’ll be given exercises to:
  - Improve the range of movement in your ankle
  - Strengthen muscles in your foot
  - Improve your balance, including using a wobble board
  - Gradually increase your cardiovascular fitness