

Rehab guide for patients following:

# Ligament Reconstruction and/or Tendon Transfers of the Ankle

Prepared for: Rehabilitation Therapists

Prepared by: Louw van Niekerk, FRCS(Orth)

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Revision: 4

	Movement	Mobility	Rehab/Exercises	Goals before progression
<b>Immediately post-op - 2 weeks</b>	Ankle in POP	TWB elbow crutches	<ul style="list-style-type: none"> <li>• Circulatory exercises</li> </ul>	<ul style="list-style-type: none"> <li>• Upright posture</li> <li>• Stairs and transfers</li> </ul>
<b>Week 2-6</b>	<ul style="list-style-type: none"> <li>• Ankle in AKB</li> <li>• <b>Active and passive dorsiflexion</b></li> </ul>	<ul style="list-style-type: none"> <li>• PWB progressing to FWB in AKB as comfort allow</li> <li>• Wean from AKB in week 5 and 6 (indoors etc.)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Active and passive dorsiflexion</b></li> <li>• Thera-Band dorsiflexion/eversion and dorsiflexion/inversion</li> <li>• Balance work without AKB</li> <li>• Static bike low resistance</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Full active and passive dorsiflexion</b></li> <li>• Normal gait in AKB outdoors</li> <li>• Normal gait without AKB indoors</li> </ul>
<b>Week 6-12</b>	No restrictions	No restrictions	<ul style="list-style-type: none"> <li>• <b>Ensure full active and passive dorsiflexion</b></li> <li>• <b>High resistance/low reps strength lower limb</b></li> <li>• Bike/static bike mid resistance</li> <li>• Core</li> <li>• Basic plyometrics</li> <li>• Proprioception</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ensure full active and passive dorsiflexion</b></li> <li>• VMO/Hip abductor balance</li> <li>• 30-50% Hams strength</li> <li>• Proficient in basic plyometric programme</li> <li>• Proficient in basic proprioception programme</li> </ul>

	Movement	Mobility	Rehab/Exercises	Goals before progression
<b>Week 12-24</b>	No restrictions	<ul style="list-style-type: none"> <li>• Jog/Walk programme</li> <li>• Solo tennis/squash from 12/52</li> </ul>	<ul style="list-style-type: none"> <li>• High resistance/high rep strength of VMO, hip abductors and hamstrings</li> <li>• Bike high resistance</li> <li>• Advanced proprioception</li> <li>• Advanced plyometrics</li> </ul>	<ul style="list-style-type: none"> <li>• Bilateral proprioceptive control</li> <li>• 30 mins. continuous jog</li> </ul>

## SUMMARY

### Objectives

- Full dorsiflexion comparable to contralateral side to be encouraged as soon as POP removed.
- Proprioception work to start ASAP and not necessarily follow the strength programme
- Aim for jog/walk programme by 12-13 weeks. This will vary greatly among patients of various athletic ability.
- Aim to return to racket sport by 12-16 weeks
- Return to rugby, football, hockey, netball etc. 20-24 weeks unless failure to achieve final objectives.

### Notes

- Post surgery patients have POP converted to AKB and removal of sutures 2 weeks post-op.
- They are then routinely reviewed in the orthopaedic clinic at 6 weeks and 3 months.
- Earlier review if patient fails to meet goals.
- Clinical queries to be directed to [sportsinjurysurgeon@gmail.com](mailto:sportsinjurysurgeon@gmail.com)

**COMPANY NAME**