

Virtual Fracture Clinic
Orthopaedic Outpatients Department
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This is a follow-up letter to your recent consultation with the fracture care team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (bone specialist).

You have sustained a fracture to your fibula (outside ankle bone), this is classified as a stable Weber A type fracture.



Healing: This normally takes approximately six weeks to heal.

Pain and swelling: The swelling is often worse at the end of the day and raising the leg will help. Pain and swelling can last for three- six months.
Take pain killers as required. (always read the label; do not exceed the recommended dose).

Using your foot: The boot you have been given is for your comfort only. It is not needed to aid fracture healing but will improve your symptoms.

You may walk on the foot as comfort allows although you will find it easier to walk with crutches in the early stages.

Follow up: We do not routinely follow up patients with this type of injury.

If after six weeks you are:

- still experiencing significant pain and swelling or
- struggling to gradually reduce the use of the boot

Please do not hesitate to contact us for a further consultation.

If you are worried that you are unable to follow this rehabilitation plan, or have any questions, please contact us for advice.

Or, if you experience pain or symptoms, other than at the site of the original injury or surrounding area, please get in touch using the details at the top of this letter.

Please follow the management plan below.

Weeks since injury	Rehabilitation plan
0-4	<ul style="list-style-type: none"> ✓ Wear the boot all of the time when walking. ✓ Use the crutches to take some of the weight off your foot. ✓ It is okay to take the boot off at night and when resting at home. ✓ Perform the exercise in the section 'initial exercises' below regularly to get your movement back. You can start them straight away.
4-6	<ul style="list-style-type: none"> ✗ Try to stop using the boot and to walk without crutches. ✓ Start around your house first, then try outside. ✓ You may want to wear the boot if you go on a long walk. ✓ Start the exercises in the section below labelled 'Exercises to start after 4 weeks'.
6 -12	<ul style="list-style-type: none"> ✓ The fracture is healed. ✓ You can begin to resume normal, day-to-day activities but be guided by any pain you experience. ✓ Start the exercises in the section 'Exercises to start after 6 weeks' below ✗ Heavy tasks or long walks may still cause some discomfort and swelling.
12	<p>If you are still experiencing significant pain and stiffness, please contact us for further advice.</p>

Advice for a new injury:

Cold packs: A cold pack (ice pack or frozen peas wrapped in a damp towel) can provide short term pain relief. Apply this to the sore area for up to 15 minutes, every few hours ensuring the ice is never in direct contact with the skin.

Rest and elevation: Try to rest the foot for the first 24 to 72 hours to allow the early stage of healing to begin. Raise your ankle above the level of your hips to reduce swelling. You can use pillows or a stool to keep your foot up.

Early movement and exercise:

Early movement of the ankle and foot is important to promote circulation and reduce the risk of developing a DVT (blood clot). Follow the exercises that follow without causing too much pain. This will ensure your ankle and foot do not become too stiff. These exercises will help the healing process.

Early weight bearing (putting weight through your injured foot) helps increase the speed of healing. Try to walk as normally as possible as this will help with your recovery.

Smoking advice:

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure that you recover as well as you can from this injury.

If you would like help with stopping smoking, please contact a member of the Hospital Stop Smoking Team on 01384 456111 ext. 2783, please refer to the following website: <http://smokefree.nhs.uk> or discuss this with your GP.

Boot advice

Diabetic patients: If you are diabetic, please contact us to discuss your boot. This is particularly important if you have problems with your skin. We may provide you with a specialist diabetic boot.

Footwear for your uninjured foot: We would recommend choosing a supportive shoe or trainer with a firm sole for your uninjured foot. You will notice that the boot you have been given has a thicker sole, by matching this height on the uninjured side you will reduce stress on other joints.

Initial exercises

Three to four times a day

Ankle and foot range of movement exercises. Repeat these 10 times each.

Figure 1 - Point your foot up and down within a comfortable range of movement.

Figure 2 - With your heels together, move your toes apart.

Figure 3 - Make circles with your foot in one direction and then change direction

figure 1

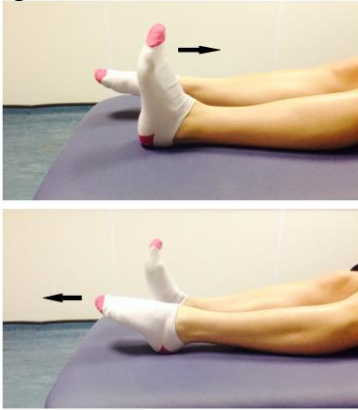


figure 2

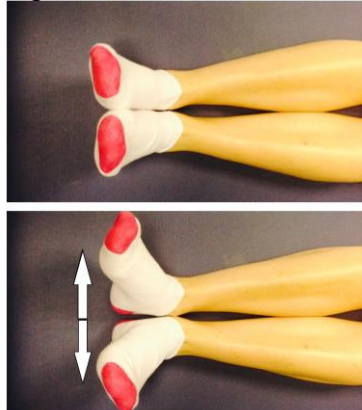


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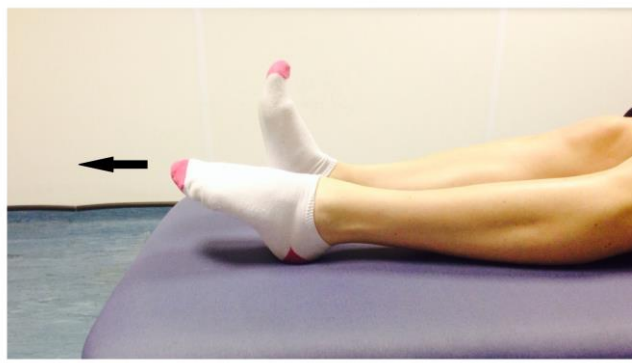


Exercises to start after four weeks

Ankle stretches

1. Sit with your leg straight out in front of you. Put a towel or bandage around your foot and pull it towards you. Feel a stretch in the back of your calf.
2. Point your toes down as far as they go, then use the other foot on top to apply some pressure to create a stretch on the top of your foot.

Hold both stretches for up to 30 seconds and repeat 3 times.



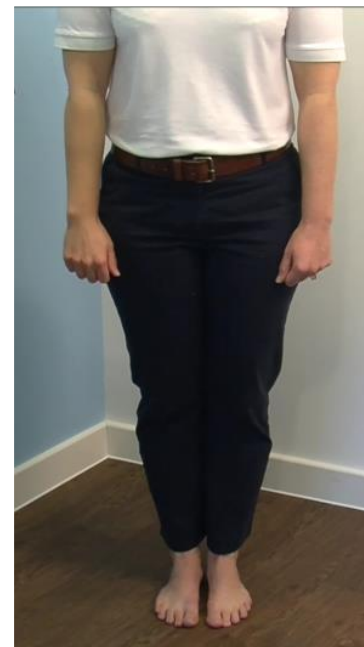
Exercises to start after 6 weeks

Balance strategy exercises



Level 1: For patients who could not stand on one leg before their injury

- Stand with your feet as close together as



possible, using something firm to hold onto. Hold this for 30 seconds. If you can do this, move onto the next exercise.

- As above, but removing your hand so that you are balancing. Hold this for 30 seconds. If you can do this, move onto the next exercise.
- Holding onto something firm, put one foot in front of each other as close together as you feel comfortable with. Hold this for 30 seconds. If you can do this easily, you may like to try without holding on, but only if you feel confident to do so.

Level 2: For patients who could stand on one leg before their injury



- Holding onto a firm surface, attempt stand on

to one leg. Hold this for 30 seconds, making sure it does not cause you any pain. Once you can achieve this without any pain, move onto the next exercise

- As above, but removing your hand so that you are balancing. Hold this for 30 seconds. If you can do this, move onto the next exercise.
- Once confident with your eyes open, progress to attempting this with your eyes closed. Always stand in a safe environment with a firm surface close by should you need it. Hold this for 30 seconds.

Advanced exercises for sports rehabilitation

Stage 1: For patients who would like to develop more advanced ankle control for sports



- a) Standing on an uneven surface such as a doubled-over pillow or wobble cushion, attempt to balance for 30 seconds. Once you can achieve this without any pain, move to Stage 1b.
- b) Once confident with your eyes open, progress to attempting this with your eyes closed. Always stand in a safe environment with a firm surface close by should you need it. Hold this for 30 seconds.

Stage 2: For patients who would like to develop advanced core control for sports



- a) Stand with one foot in front of the other, with your hands together. Swing your arms in a figure of eight in both directions for 1-2 minutes.
- b) As above, but bring your feet so they are touching toe to heel.
- c) As a) and b) above, but with your eyes closed.