

Sports Therapy
Manual Therapy
Electrotherapy
Manipulation
Rehabilitation
Pre-habilitation
Clinical Pilates
Pre-Season Screening
Exercise Prescription
Massage

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AUSTRALIAN
PHYSIOTHERAPY
ASSOCIATION

Member

POST-OPERATIVE PHYSIOTHERAPY INFORMATION

COMPARTMENT DECOMPRESSION

SURGERY:

After your surgery you will have a crepe bandage on your lower leg. This will be removed and replaced with an elastic compression bandage or 'tubigrip' before you go home. YOUR RECOVERY is greatly dependent on your post-operative routine. The following advice will assist with your recovery.

CARE OF YOUR LEG AFTER SURGERY:

During the first two weeks after your operation, your lower leg is recovering from the trauma of surgery, and you need to take care not to "over-do-it". This means elevating your lower leg above the level of your hip, for the majority of the day in the first week post-op. Also using your crutches (as described below) to help support your leg, and wearing your tubigrip bandage to help control swelling.

CRUTCHES:

Use crutches initially to help support your leg. Take as much weight as is comfortable through your operated leg and gradually increase this. **Use the crutches until you can walk comfortably without a limp**, which may take up to one week after your surgery. It is best to keep your walking/standing time to a minimum, though you can get up for short periods of time regularly.

If you notice an increase in pain, throbbing or swelling around your lower leg it is time to slow down a little and put your feet up.

When using crutches on stairs remember:

UP STAIRS - Good leg, operated leg, crutches

DOWN STAIRS - Crutches, operated leg, good leg

ELEVATION:

Elevation of your lower leg in the early days post-operatively is the most important way to reduce swelling, therefore reducing pain and aiding tissue healing. The lower leg should stay at the level of the hip or higher, if possible, while sitting, or supported underneath with pillows overnight.

ICING YOUR LEG:

Ice has the effect of controlling inflammation and swelling which your leg is prone to after surgery or trauma. Place the ice over the tubigrip. You can use a commercial ice pack, bag of frozen vegetables or crushed ice. For the first week after your surgery, try to ice your leg every 1-2 hours, for 15 minutes each time. This is particularly important after completing your exercises or walking. After the first week continue to apply ice as needed to control swelling.

BANDAGE:

You will go home with a tubigrip bandage on your lower leg. Wear this until your review with your surgeon. The wounds will be covered by waterproof dressings to allow you to shower, just remove the tubigrip.

PHYSIOTHERAPY:

It is important to regain movement and strength of your ankle and maintain good calf length on your operated leg. If you plan to return to high-level activities, or you are concerned regarding your progress, it is wise to consult a physiotherapist for appropriate rehabilitation.

EXERCISE PROGRAMME:

A physiotherapist will help you to commence these exercises while you are in hospital. They are important to ensure the layers of operated tissue do not become stiff and continue to move smoothly over each other.

You should gently **ENCOURAGE** the movements within the limits of discomfort. Do not force the movements. Continue the exercises until your review with your surgeon.

EXERCISES

1. ANKLE EXERCISES

Sit so that your leg is supported and ankle free to move. Move ankle in the following directions:

UP/DOWN - Point foot away from you, then bring toes and foot back towards you.

SIDE/SIDE - Keep leg still and move sole of foot to face inwards, then outwards.

CIRCLES - Keep leg still and move ankle to "draw" a circle with your toes. Gently try to make the circle as big as possible. Do both directions.

REPETITIONS: 2 minutes each direction - 3 times/day.



UP AND DOWN

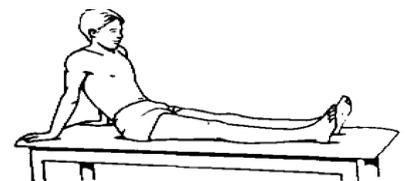


SIDE TO SIDE AND CIRCLES

2. ISOMETRIC QUADS CONTRACTION

With a folded towel placed lengthways under your knee as shown in the diagram, tighten the muscles on the front of your thigh to lock your knee. Hold for 3 seconds.

REPETITIONS: Start with 1 set of 10 reps, and increase number of sets as comfortable up to 3 sets of 10.



3. HIP/KNEE FLEXION

Keeping your heel on the bed, slide it back towards your buttocks, allowing the knee to bend gently. **ENCOURAGE** this movement within the limits of discomfort. Do not force it.

REPETITIONS: Start with 1 set of 10 reps, and increase number of sets as comfortable up to 3 sets of 10.



RETURN TO ACTIVITY GUIDELINES: (These timeframes are guidelines only – please discuss specific return to activities/sports with your surgeon)

1. Exercise Bike 5 - 10 days
2. Swimming After you review with your surgeon (When the wounds are well healed)
3. Running 4 - 6 weeks
4. Sport 6+ weeks