

Superior Avulsion Fracture to your Talus

This is a small flake fracture to the top of the talus bone

Healing:

It normally takes 6 weeks for this fracture to heal.

Smoking will slow down your healing. We would advise that you stop smoking while your fracture heals. Talk to your GP or go to www.smokefree.nhs.uk for more information.

Pain and swelling:

You may have foot pain and swelling for 3-6 months after your injury. Swelling is often worse at the end of the day.

Taking pain medication and elevating your foot will help. More information is on the next page.



Walking and your boot:

When standing and walking you should only lightly touch your foot to the floor. You should not put weight through your foot.

The boot protects your foot and will make you more comfortable. Keep the boot on all the time, including in bed at night. Always wear a sock in the boot. Please inform us if you are diabetic; you may require a specialist boot.



Follow up:

You will see a specialist normally approximately 4 weeks after your injury. The specialist will explain the next stage of your care.

Any questions:

If you are concerned about your symptoms, are unable to follow this rehabilitation plan or have pain other than at the site of your injury please contact the Virtual Fracture Clinic team.

Personal Hygiene:

You should remove the boot carefully for washing and to change your sock once a day.

Whilst doing this, you must always **keep the foot neutral**, as shown in this picture.



Do not stretch the calf or do any ankle exercises. This will disrupt bone healing and your long term recovery.

It is important to keep your foot as dry as possible in your boot. If you notice any redness, soreness or damage to your skin, please inform our team immediately.

Preventing a Deep Vein Thrombosis (DVT):

You are not allowed to do any exercises with this ankle for a number of weeks. This puts you in a higher risk group for developing a DVT (blood clot) which could potentially have very serious effects.

You will have been prescribed a course of Enoxaparin (a type of heparin), which is blood thinner. This is given daily by injection normally for the first 4 weeks. You will be shown the injection technique. Try to have this medication at the same time every day. If you have any questions about this, or if you have a reaction to the medication, please speak to your GP or district nurse.

The used injections **MUST** be disposed of safely in the yellow 'Sharps Bin' provided. Once full, these can be collected from your home if you are a resident of Brighton and Hove. Please telephone 01273 242077 to arrange collection. If you live outside Brighton please contact your local council's clinical waste disposal service.

I am struggling with my boot. What do I do?

The boot has a thicker sole; this can make you feel uneven. We would recommend choosing a supportive shoe or trainer with a firm sole for your uninjured foot. If you are struggling to wear out of your boot please contact us.

If you need more advice contact the Virtual Fracture Clinic.

I am diabetic, does this change things?

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.

When can I start driving?

You can return to driving when:

- You are no longer using your boot,
- You can walk comfortably
- You can perform an emergency stop pain free.

Always test your ability to drive in a safe environment first.

How can I get a certificate for work?

You can get a fitness for work statement from your GP.

What do I do with my boot and crutches when I no longer need them?

We are not able to use boots again. These should not be returned to the hospital.

Crutches can be returned to the Fracture Clinic or A&E.

How do I contact the Virtual Fracture Clinic?

Call 01273 696955 extension 63428.

Email uhsussex.fracturecare@nhs.net