



AB220. 85. Effect of Immediate weight bearing following ankle fracture fixation

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Background: Ankle fractures are one of the most common injuries treated by Orthopaedic Surgeons. Open anatomic reduction and internal fixation (ORIF) is the mainstay of treatment for unstable ankle fractures. Traditionally, anatomic reduction was protected post-operatively by limitation of the patient's weight bearing status. This typically occurred for a period of 6 weeks post-operatively to allow the fracture to heal in a reduced position. However, immediate weight bearing post-operatively may facilitate a quicker return to normal function compared to the former period of protected weight bearing. The aim of our study is to identify the functional outcome of patients who have undergone acute ankle ORIF and immediate weight bearing post-operatively. We further aim to identify any potential complications of patients who have undergone acute ankle

ORIF and immediate weight bearing.

Methods: This is a retrospective case series of level 4 evidence regarding patients who have undergone ankle fracture ORIF +/- arthroscopy (from July 15 2016 to July 17 2017 inclusive). Each patient's presenting ankle radiograph was classified according to the Lauge-Hansen ankle fracture classification with subsequent correlation to intra-operative arthroscopic findings. Functional outcome at a minimum of one year was evaluated with the American Academy of Orthopaedic Surgeons (AAOS) metric.

Results: The mean AAOS score (0-100) achieved was 84.0 ± 12.6 . One patient required removal of hardware due to prominence. No wound dehiscence occurred. No loss in reduction was identified at one year follow up.

Conclusions: In conclusion, immediate weight bearing following ankle fracture fixation is associated with few complications and has excellent short-term outcomes.

Keywords: American Academy of Orthopaedic Surgeons (AAOS); ankle fracture; Lauge-Hansen; open anatomic reduction and internal fixation (ORIF); weight bearing

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