

## *Lateral Ligament Reconstruction/Brostrom procedure*

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### **General Facts**

- The goal of this surgery is to return you to full strength and stability in the shortest amount of time.
- This surgery will repair and tighten the torn or partially torn ligaments to prevent further episodes of twisting.
- You will be in a hard plaster splint for the first 10-14 days after surgery. Afterwards, you will be placed in a boot brace.
- The general rate of healing is 75% healed by 3 months and 90% healed by 6 months.
- No sports involving cutting (racquetball, soccer, tennis, etc.) ballistic movements, or strenuous running will be permitted for 3-4 months.

### **Postoperative Course**

#### **Day 1**

- The foot will be wrapped in a plaster splint with lots of padding and a removable bandage. If for any reason your splint is uncomfortable or too tight, remove the ace wrap, loosen padding, and re-apply to your comfort level.
- It is important to ice and elevate the foot, take pain medication, and rest as needed.
- Expect numbness in the ankle for 4-12 hours and then anticipate the onset of pain.
- No weight bearing on injured foot until your first post-operative visit at the office.
- Do not get the ankle or splint wet.
- Begin dorsiflexion exercises in the splint (bring toes toward knee)

#### **Day 4**

- Pain should improve after the 3<sup>rd</sup> day. If your pain has worsened since day 3-4 or you have a fever and/or chills, please call the office.
- Wiggle toes and move foot around in splint as tolerated.
- Perform isometric calf contractions 5 times a day for 20 minutes.
- Work the knee, hip, and upper extremities.

#### **Day 10 – 14 days (approximately)**

- First post-operative visit in the office.
- Your sutures will be removed and the dressing will be changed.
- You will be placed in a boot brace with your ankle in a neutral position to prevent a large amount of range of motion.
- You must sleep in either boot brace or night splint. You can purchase a night splint on amazon.com, which you will need to sleep with for 12 weeks post-operatively (alternatively you may use the boot brace but this is more cumbersome).
- You will begin weight bearing as tolerated in the boot and continue to use the crutches for added stability.
- Set up Physical therapy appointment
- Talocrural joint mobilization & PROM with knee flexed & extended in open & closed chain
- Edema control
- Begin to do deep knee bends out of the boot brace 5 times a day for 20 minutes each. This exercise is crucial in your recovery and is essential to regaining range of motion and strength of the ankle.
- You will be shown how to perform basic range of motion exercises. AVOID plantar flexion (pointing the foot down) and inversion (turning the foot inward) ankle movements.
- If the incision is healing well, you may begin to get the ankle wet in the shower 2-3 days after your post-operative visit.

#### **3 weeks**

- If the incision is healed, you may submerge the ankle in water.
- Gentle exercise on a stationary bike is permitted in the boot.
- Walking without crutches while still wearing the boot is permitted.
- Begin gentle submax peroneal isometrics
- Begin gait training on AlterG if available

#### **6 weeks**

- Walking may be permitted without the boot brace.
- You will be given a cloth brace to wear during long periods of walking and exercise.

- Avoid walking on uneven or rocky terrain.
- Exercise on a stationary bike or elliptical is permitted without the boot.
- Open chain strengthening PF/DF, eversion to neutral
- Balance / Proprioception exercises on level surface
- Gait training
- Step downs on 2-4 inch block to promote DF

### **8 weeks**

- Light jogging and other exercise activities such as squatting and weight lifting are permitted.
- Continue to increase your activity as tolerated.
- Balance/Proprioception
- Stationary biking, add resistance

### **10 weeks**

- Begin plyometric drills starting front to back & progressing to lateral movements
- Begin to do large figures of 8's, then progress onto small figures of 8's,

### **12 weeks**

- Smaller figure of 8s
- Kicking and plantar flexion in pool program
- Continued gait/ jogging training

### **14 weeks**

- Cutting activities
- Progressive closed chain kinetic program, increasing intensity/higher level exercises incorporating proprioceptive challenges
- Agilities
- Progressive absorption/agility/running progression.

### **16-24 weeks**

- Introduction of chaos challenges
- Return to practice.
- Return to play