AO Handbook—Nonoperative Fracture Treatment

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4 Tibial and malleolar fractures

4.14 II Malleolar fractures — Functional treatment

Indication

44-A1.1 and 44-A1.2 type fractures

1 Indication

Functional treatment is indicated only for stable fractures. Reduction in type A1.2 fractures is not necessary.

Functional treatment can also be indicated following ORIF of unstable fractures.

With functional treatment, movement of the ankle joint is possible.

2 Functional treatment

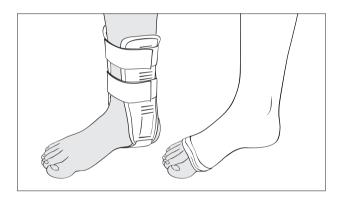
2.1 Implementation

Usually, functional treatment should continue for about 6 weeks after injury.

Elastic bandages, functional braces, and compression stockings support the soft tissues. Remove the brace if the patient feels pain, and check the soft tissues for pressure sores.

Mobilize the patient as soon as possible. Physiotherapy can be helpful (joint movements, lymphatic drainage, manual therapy). Weight bearing is allowed within the limits of any pain and / or swelling.

Check x-rays are taken after 3 and 6 weeks.



Without immobilization, pharmaceutical thromboembolic prophylaxis is only indicated in high risk patients. Non-steroidal anti-inflammatory medication helps to relieve pain and swelling.