

Case Study - Syndesmotic Injuries:

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CSOT November 2017, Tampa



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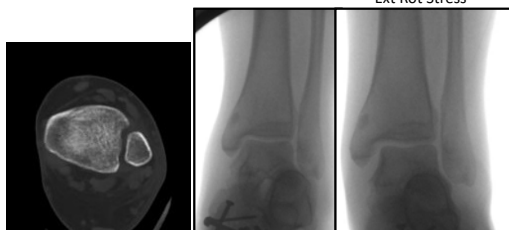
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Case 1 – Pre-op

- 25 y.o woman s/p slip and fall
- Lisfranc injury
- Ankle painful and swollen



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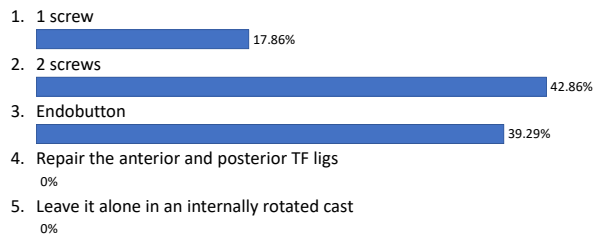
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Options

POLL OPEN



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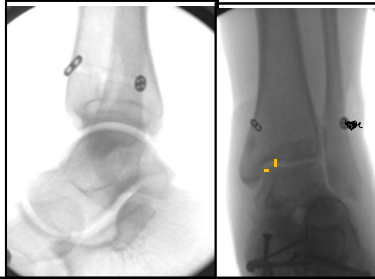
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### Case 1 - Post-op

- No fibula fracture
- Stable on stress test after fixation
- Knot led to significant irritation laterally and had to be removed at 6 months



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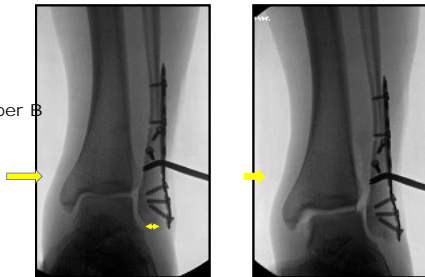
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### Case 2 – 30 y.o runner s/p fall

Weber B



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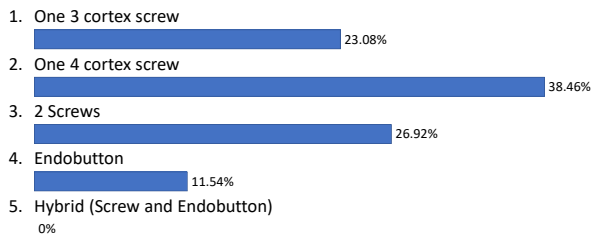
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### Best Treatment option?

POLL OPEN



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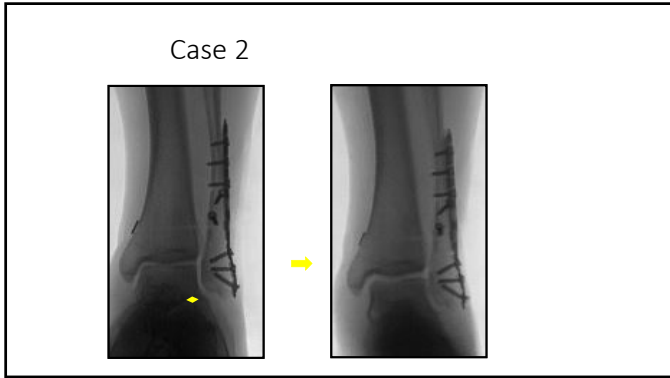
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POLL OPEN

### Now What?

1. Leave the ankle alone in an internally rotated case  
6.9%
2. Remove the endobutton and use a screw  
20.69%
3. Second Endobutton at a different angle?  
3.45%
4. Add a Screw  
65.52%
5. Repair the deltoid ligament  
3.45%

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How do you repair the deltoid?

- A - You don't (should never have opened it)
- B - Sutures
- C - Anchors
- D - Allograft
- E - Soft tissue washer

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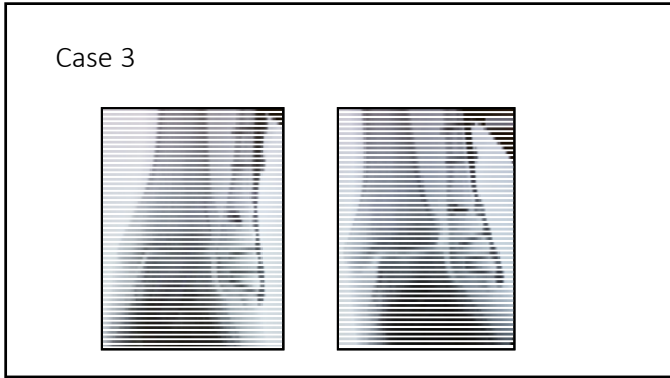
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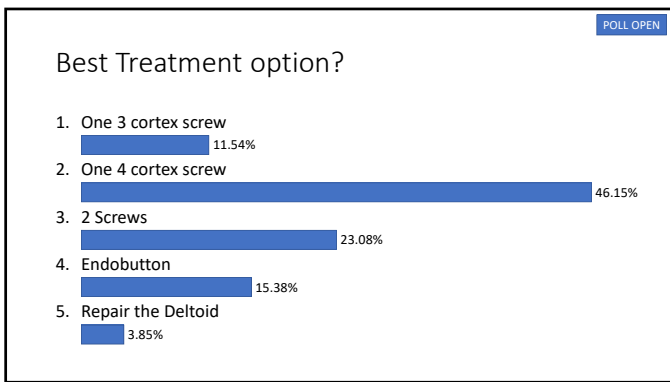
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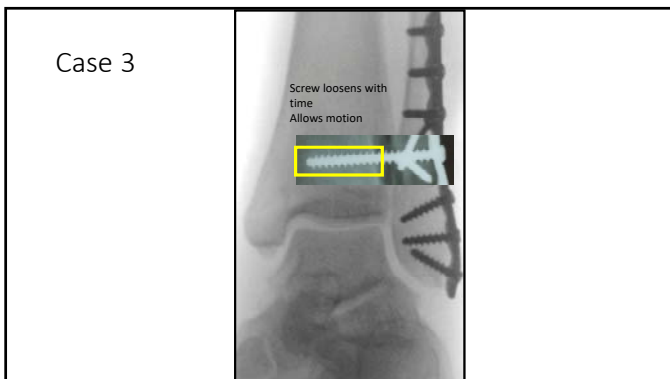
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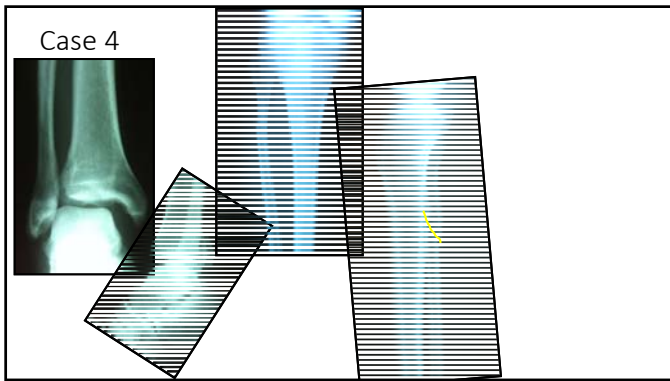
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Should We do something different with a Maisonneuve Injury? POLL OPEN

1. Fix the fibula fracture and use endobuttons for syndesmosis  
12.5%
2. 1 screw for the syndesmosis  
0%
3. 2 screws for the syndesmosis  
50%
4. Fix the posterior malleolus which will stabilize the syndesmosis  
37.5%

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➤ Endobutton Devices:

- No difference in outcome, but less frequent Implant removal
  - Naqvi GA, et. Al., AJSM 2012
  - Cottom JM, et. Al. JFAS 2009
  - Schepers J, Int Orthop, 2012
- Better outcome, lower reoperation rate-
  - Laflamme M, JOT 2015

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Summary

- Options are still controversial
- Goal stable fixation
- Try to avoid need for later hardware removal
- Anatomic reduction (most important!!!)

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