Charcot Reconstruction Using External Fixation

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Charcot

- Ankle
- Hindfoot
- Midfoot
- Infection
- Ulcers
- Charcot-Marie-Tooth

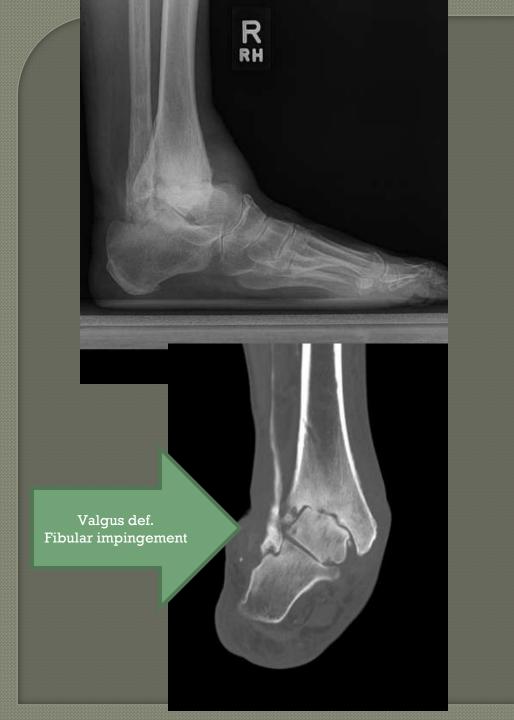






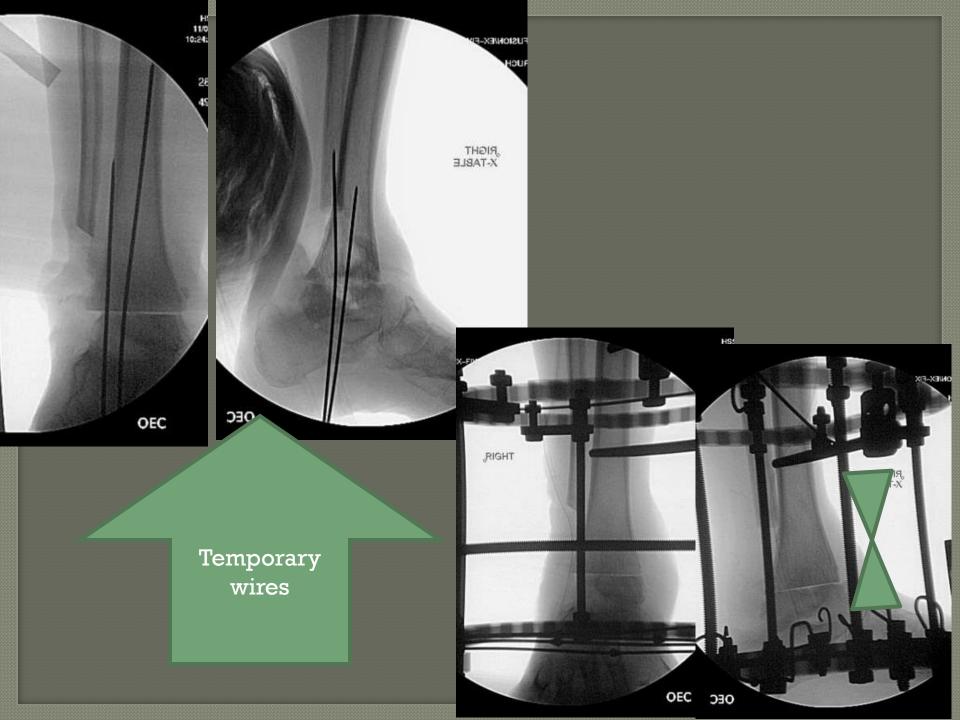
Before: Charcot variety





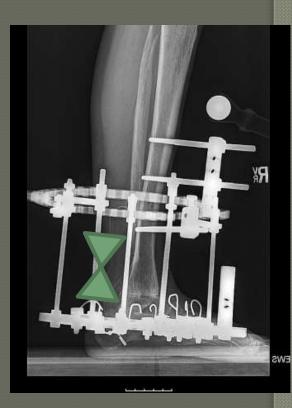
Before









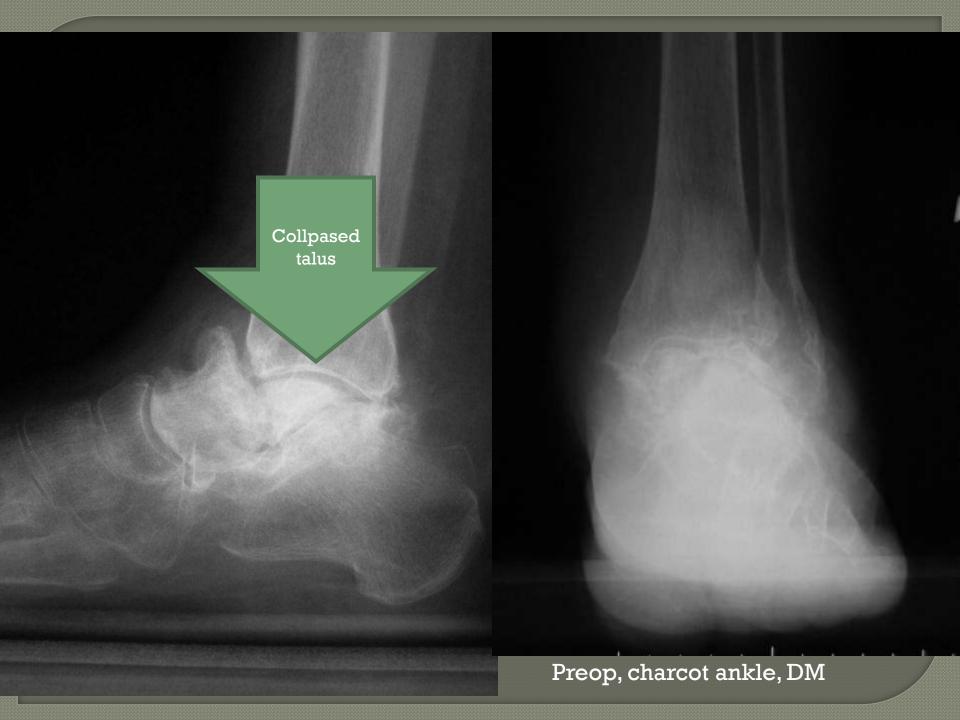


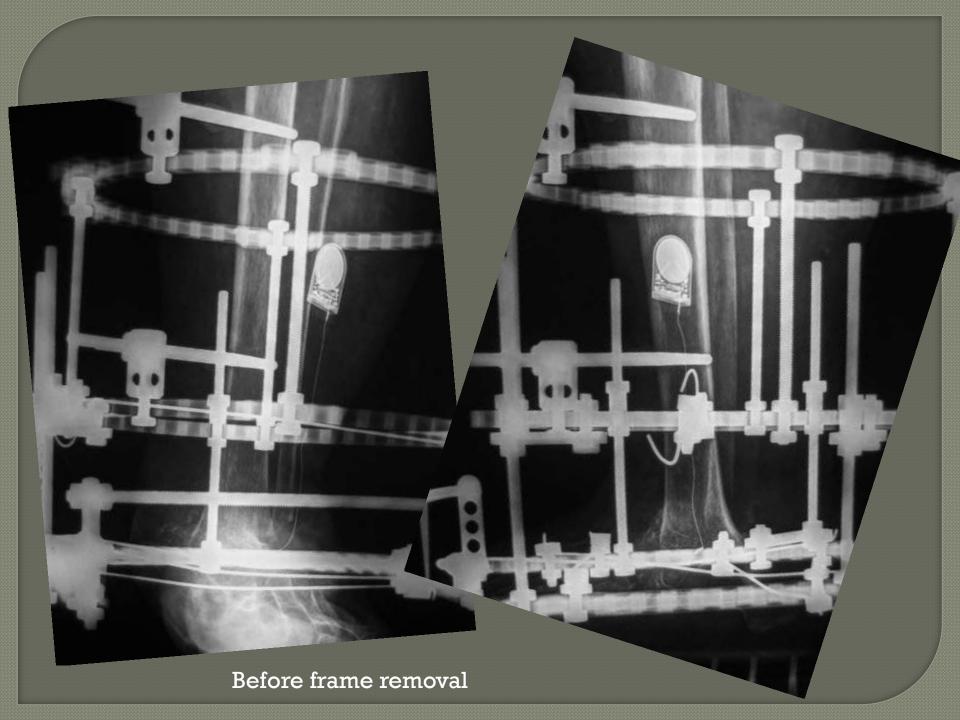
After: Solid ankle/ST Fusion











AFTER











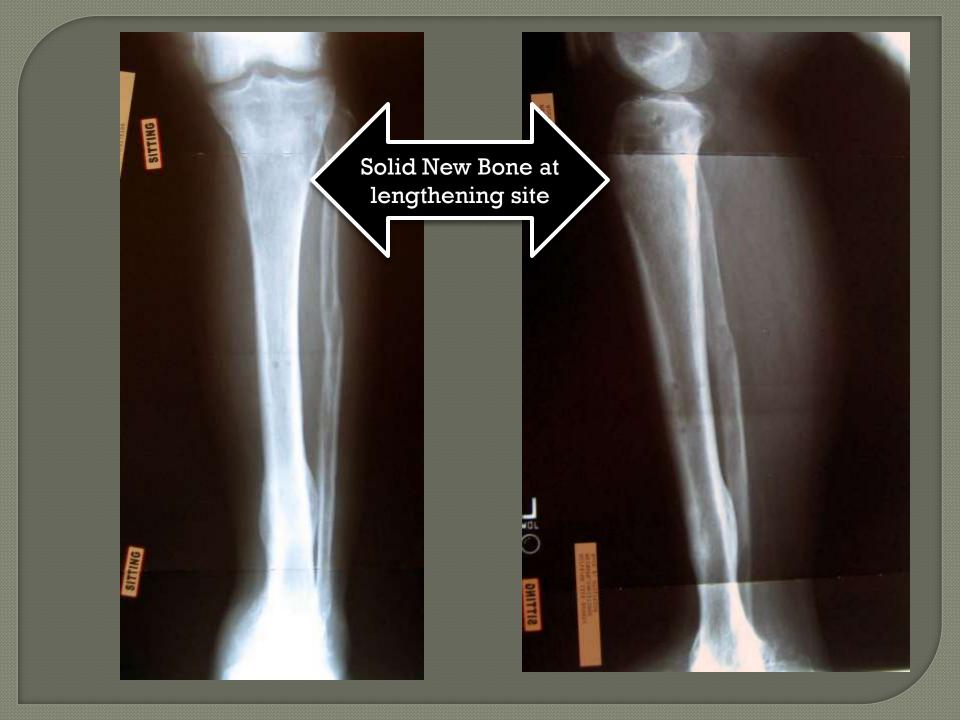














After: no LLD



After: Plantigrade foot









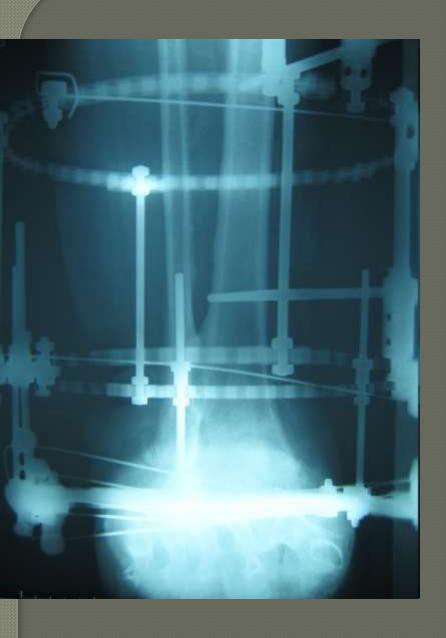


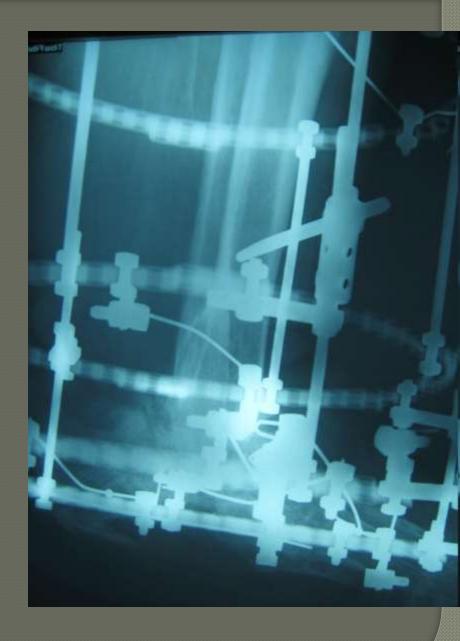
collapse









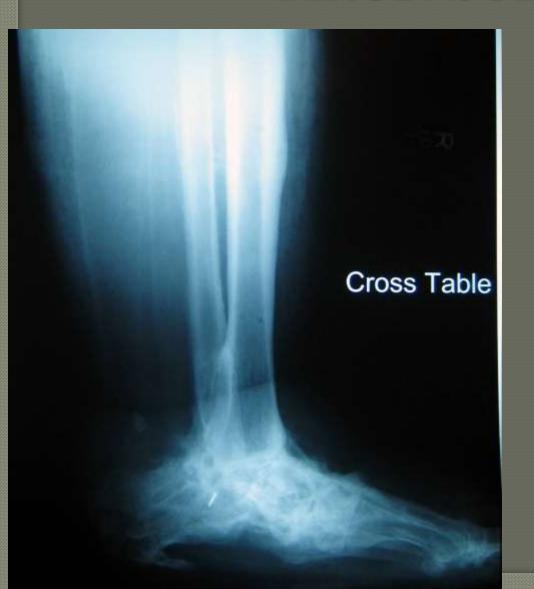




Custom shoe needed



After: Solid TTC fusion





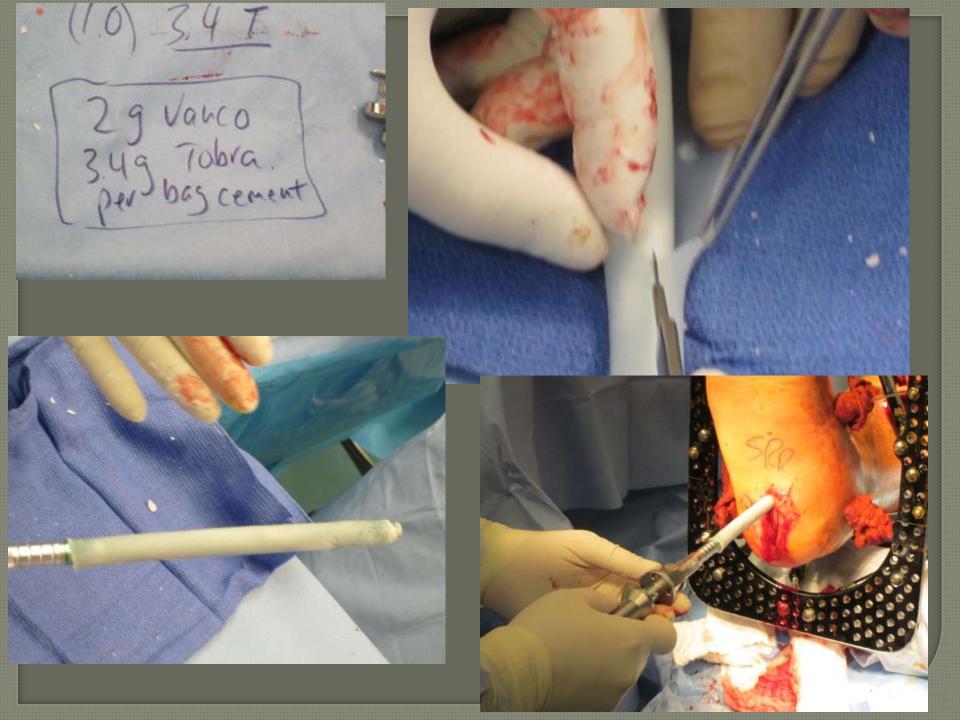








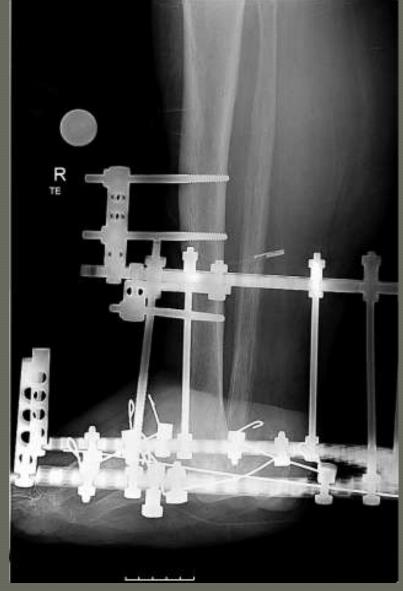


















After: Solid Tibio-calcaneal fusion & eradication of infection



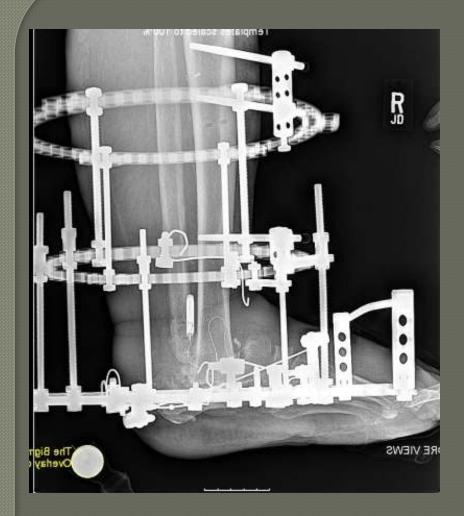


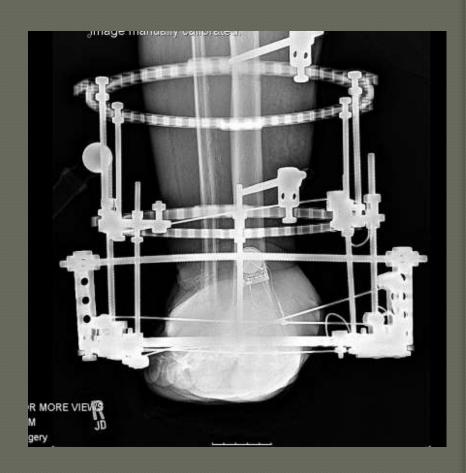






Before: Poor Calcaneal bone stock







After: Solid T-C fusion









Before: severe ankle hindfoot destruction with ulcer + infection









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Ankle/ Hidfoot Lessons

- Ankle + ST fusion
- Limit WB
- Talus often nonviable
- Tib-Calc fusion good option
- Tibia lengthening good option for some

- Custom Shoes
- IM rod is option
- Antx coated for infx
- Infection can be addressed successfully
- Excise ulcers
- Poor calcaneal bone stock- frame is good



Midfoot Charcot

before





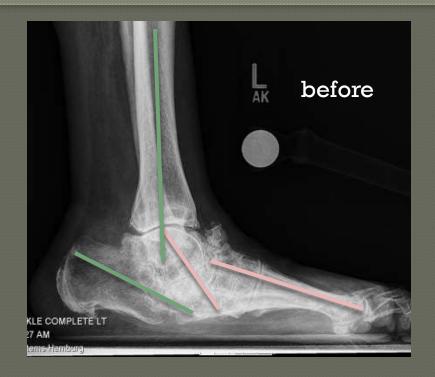




























after



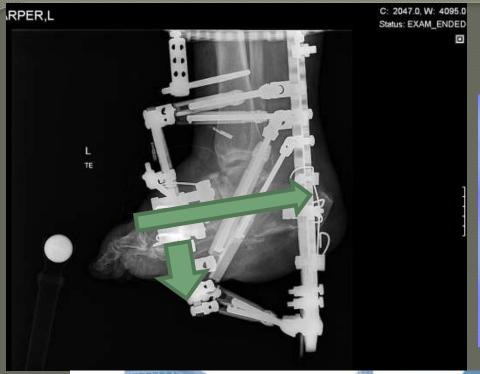


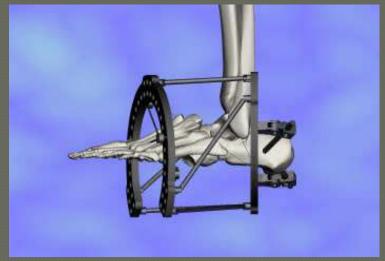




Before: Rockerbottom









after





Midfoot Lessons

- Rule out infection
- Try to use IF
- If infected, use Ex Fix or stage
- Gastroc recession
- Indications for External Fixation
 - Large deformity
 - infection

Foot deformity

Charcot-Marie-Tooth Disease

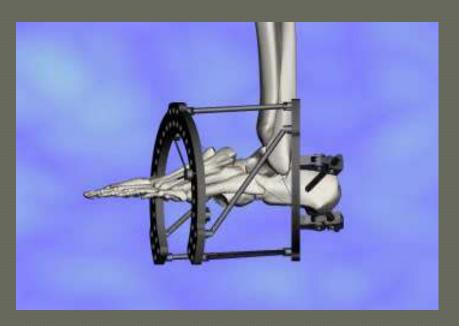


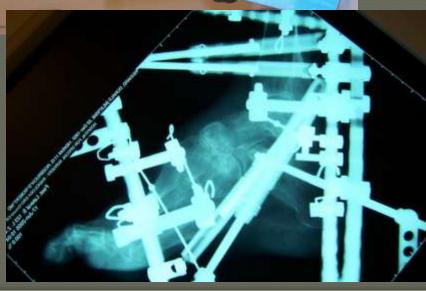


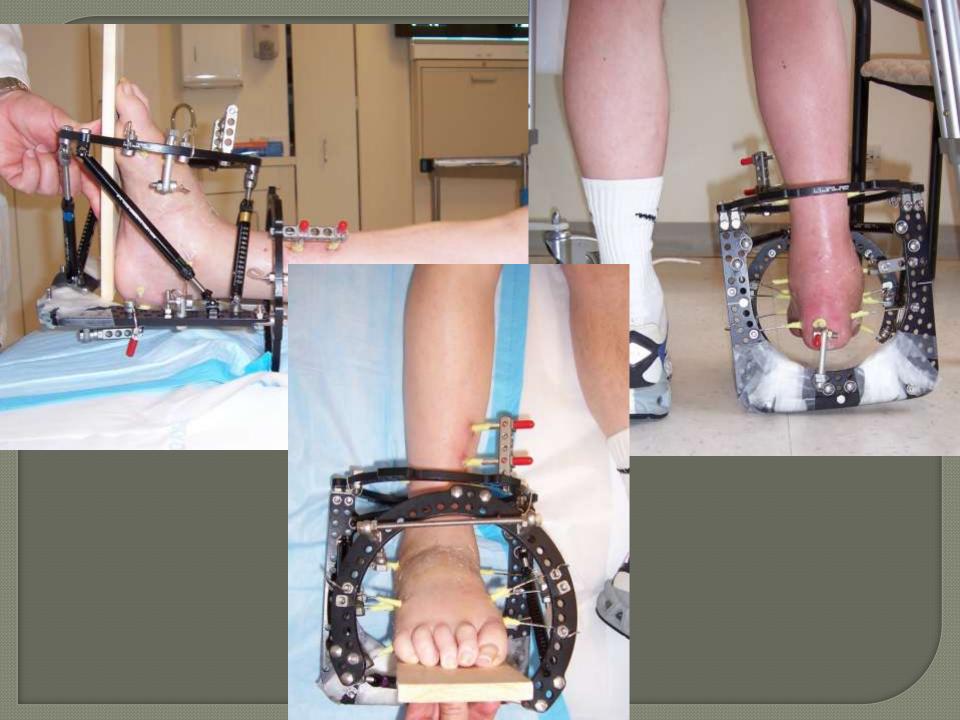


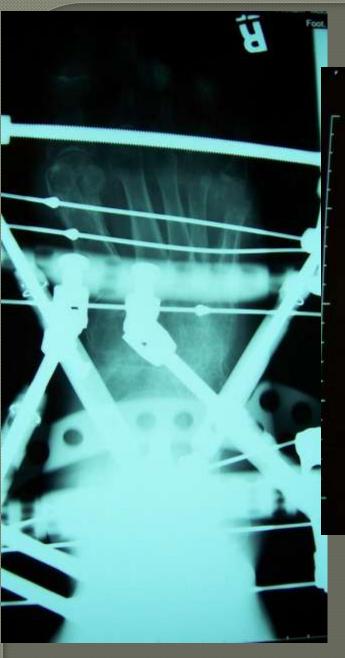


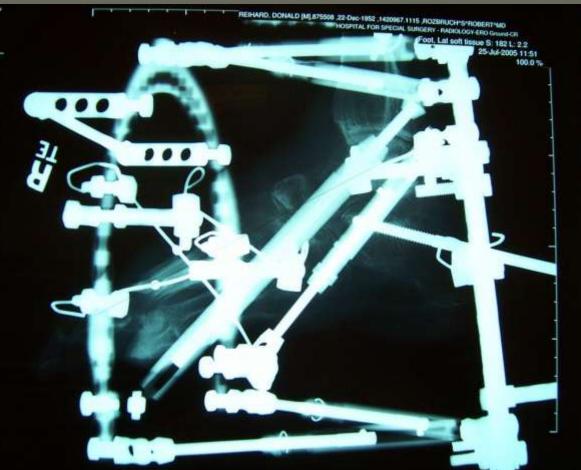












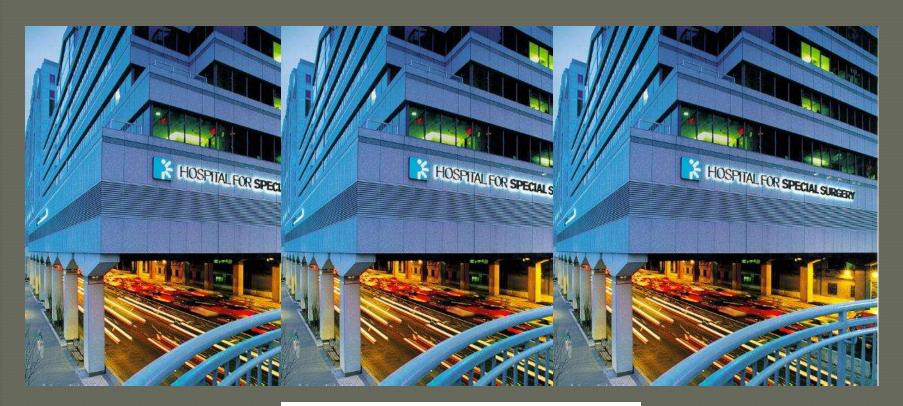
After







Thank You



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