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Restoring Function. Maximizing Performance.

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FOOT & ANKLE CONDITION

Ankle Fracture

Ankle Bone Fracture — Patient Condition Guide



The ankle bones (tibia, fibula, malleoli) and where they fracture · for education; your anatomy may differ

OVERVIEW

An ankle fracture is a break in one or more of the bones forming the ankle joint — the tibia, fibula, or both. Fractures usually result from a twisting fall, a sports injury, or a direct impact, and range from stable, minor breaks to complex, unstable injuries.

ANATOMY

The ankle joint is formed by the end of the tibia, the fibula, and the talus, held together by strong ligaments. Fracture stability depends on how many of these bony and ligamentous structures are disrupted.

SYMPTOMS

- Immediate pain and swelling
- Inability or difficulty bearing weight
- Visible deformity in more severe fractures
- Bruising that spreads over the following days

DIAGNOSIS

X-rays confirm the fracture pattern and assess joint alignment. CT scan is sometimes added for complex fractures to better plan surgical treatment when needed.

TREATMENT OPTIONS

Stable fractures with good alignment are often treated in a cast or boot without surgery. Unstable fractures, or those with joint misalignment, are treated with open reduction and internal fixation (ORIF) to restore normal anatomy and allow the joint to heal properly.

RECOVERY TIMELINE

- Weeks 0–6: non-weight-bearing or protected weight-bearing per fracture pattern

- Weeks 6–12: progressive weight-bearing and motion
- Months 3–4: strengthening and gait retraining
- Months 4–6: return to sport and high-impact activity

FAQS

Q Will I need surgery for my ankle fracture?

This depends on the fracture pattern and whether the joint remains well-aligned; many stable fractures heal well without surgery.

Q How long will I be non-weight-bearing?

This varies by fracture severity and treatment, typically several weeks, and will be guided by your surgeon and follow-up X-rays.



SCAN FOR THE LATEST VERSION ONLINE

robertpettitmd.com/handouts/ankle-fracture.pdf

This handout is for general patient education and does not replace personalized medical advice. Always follow the specific instructions given by Dr. Pettit and your care team.

ANKLE FRACTURE

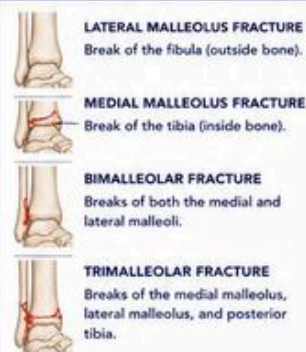
UNDERSTANDING YOUR INJURY & TREATMENT OPTIONS

Ankle fractures are breaks in one or more of the bones that form the ankle joint. These injuries can range from stable, non-displaced fractures to complex fractures that cause the ankle joint to become unstable.

Appropriate treatment is important to restore alignment, ensure proper healing, and return you to your activities.



COMMON FRACTURE TYPES



HOW IT HAPPENS

Ankle fractures often occur from a fall, twisting injury, or direct impact. The foot may roll inward (inversion), roll outward (eversion), or twist.



COMMON SYMPTOMS

- Pain, swelling, and tenderness
- Bruising around the ankle
- Inability to bear weight
- Deformity or instability
- Limited range of motion

DIAGNOSIS

Your doctor will perform a physical exam and order imaging studies to confirm the diagnosis and assess the severity.



TREATMENT OPTIONS

1. NON-SURGICAL TREATMENT (For stable, non-displaced fractures)

- Immobilization in a cast or walking boot
- Protected or non-weight bearing with crutches
- Elevation and ice to reduce swelling
- Pain control as needed
- Physical therapy after healing to restore strength and motion



GOAL: Allow the bone to heal while minimizing complications.

2. SURGICAL TREATMENT – ORIF (Open Reduction Internal Fixation) (For displaced or unstable fractures)

The bones are realigned and stabilized with plates and screws to hold the fracture in place while it heals.



GOAL: Restore normal alignment, stabilize the fracture, and allow early return of function.

3. SURGICAL TREATMENT – SPECIAL FIXATION TECHNIQUES (For complex fractures)

- Syndesmotic fixation (tightrope or screws) if the ligaments between the tibia and fibula are injured.
- Posterior malleolus fixation if there is a fracture at the back of the tibia.

RECOVERY & REHABILITATION (Typical Timeline)

0-2 WEEKS Protection Phase	2-6 WEEKS Early Healing	6-12 WEEKS Healing & Mobility	3-6 MONTHS Strength & Function	6+ MONTHS Return to Activity
 - Immobilization in cast or boot - Non-weight bearing with crutches - Focus on swelling control	 - Continue protection - May begin gentle range of motion (when appropriate) - Partial weight bearing may begin	 - Wear out of boot or brace - Increase motion - Begin strengthening exercises	 - Advance strengthening and balance training - Return to normal daily activities	 Return to sports and high-impact activities when strength and stability allow

Recovery times vary. Full recovery can take 6-12+ months depending on the severity of the fracture and individual factors.

PREVENTION TIPS

- Wear appropriate footwear
- Strengthen muscles and improve balance
- Be careful on uneven or slippery surfaces
- Use protective gear during sports



WHEN TO SEEK IMMEDIATE CARE

- Inability to bear weight after injury
- Severe pain or deformity
- Numbness, tingling, or pale/cold foot
- Open wound near the fracture



Scan for exercise videos and more information about ankle fractures.