Foot and ankle reconstruction—enigmas eluding solutions

Foot and ankle surgery is one of the fastest growing sub-specialties of Orthopedics. It has come of age with advanced techniques for assessment & reconstruction allowing faster return to normal activities after surgery.

The patient expectation of restoration of normal foot and ankle function following treatment has spurred innovative research, and development of surgical and rehabilitation techniques which enhance recovery. This is more so with sports injuries and the athletic population.

On the other hand, increasing numbers of patients with lifestyle diseases such as diabetes, has led to greater incidence of neuropathic feet with concomitant deformities and complications. The techniques to treat Charcot feet have evolved significantly allowing better foot function than was possible 15 years ago. The main aim of bringing out this Foot & Ankle series has been to highlight recent innovative techniques for managing challenging foot and ankle problems.

We have 2 articles on Charcot foot, both from the Diabetic Foot Unit at King’s college Hospital, London, a center renowned for its work on Charcot foot. The first one is a very interesting study looking at hardware failure and non-unions in patients undergoing Charcot foot reconstructions. An interesting finding was that a two-segment reconstruction such as both hindfoot and midfoot had a 12 times higher chance of failure as compared to a single segment reconstruction. The second article on Charcot feet provides in depth surgical techniques and tips and tricks for handling these difficult deformities. A must read.

The role of calcaneal osteotomies in plano-valgus and cavo-varus feet has been nicely elaborated in the next article submitted by the Department of Foot and Ankle Orthopedic Surgery, University of Pennsylvania Medicine, USA. A discussion of the biomechanics of the foot following the osteotomy is intriguing.

An interesting study from the Department of Orthopedics, Golden Jubilee National Hospital, Scotland, United Kingdom evaluates a novel modified Standing Hip Knee Ankle Anteroposterior Radiograph for assessment of hindfoot alignment; and finds it a useful tool comparable to special hindfoot alignment views. The authors recommend this view especially for patients undergoing arthroplasty or osteotomy around the knee till more evidence is available.

The next article outlines the indications and outcomes of Tibial sesamoidectomy in a series of 26 cases with a mean follow up of around 10 months. The authors have found it to be a procedure giving satisfactory results for a diverse group of indications. Overall a very nicely written outline of a rare procedure, which should be in the armamentarium of every foot and ankle surgeon.

An exhaustive review of turf toe injuries is provided with details of surgical technique by renowned surgeons from the Department of Orthopaedics, University of Tennessee College of Medicine at Chattanooga, USA. This rare but serious injury occurring especially in athletes can result in career ending disability for some and needs to be recognised early and treated aggressively.

Last but definitely not the least is a series of case reports from the Orthopaedics Department, Brisbane Private Hospital, Brisbane, Australia. The authors have provided a detailed discussion on the role of bone scan in the diagnosis of a tibialis posterior tenosynovitis and the scintigraphy findings. They suggest that it can be a method of detection of Tibialis Posterior tenosynovitis that would be highly useful in regions where an MRI is not accessible or too expensive or contra-indicated such as patients with pacemakers or spinal cord stimulators.

Overall, this series has turned out to be a very insightful and interesting collection of articles on the diverse challenges and enigmas faced by Foot and ankle surgeons and their solutions.

We are deeply indebted to and thankful to all the authors of the articles who have submitted such excellent content from all around the world, making this a truly global series. Without your support, this series would not have come to light.

We are also thankful to the persistent efforts of Darren Yu and the whole team at Annals of Joint whose repeated timely reminders and hard work in getting the articles ready for publication made this whole thing possible.

Hope you all enjoy surfing this series as much as we enjoyed compiling this for you!
Acknowledgments

Funding: None.

Footnote

Provenance and Peer Review: This article was commissioned by the editorial office, Annals of Joint for the series “Foot & Ankle Surgery”. The article did not undergo external peer review.

Conflicts of Interest: Both authors have completed the ICMJE uniform disclosure form (available at http://dx.doi.org/10.21037/aoj-2019-fa-08). The series “Foot & Ankle Surgery” was commissioned by the editorial office without any funding or sponsorship. VKP served as the unpaid Guest Editor of the series and serves as an unpaid editorial board member of Annals of Joint. MSS served as the unpaid Guest Editor of the series. The authors have no other conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: https://creativecommons.org/licenses/by-nc-nd/4.0/.

Vinod K. Panchbhavi

Maninder Shah Singh
Vinod K. Panchbhavi, MD, FACS, FAOA, FABOS  
Professor, Department of Orthopedic Surgery, The University of Texas Medical Branch (UTMB), Texas, USA.  
(Email: vkpancb@utmb.edu)

Maninder Shah Singh, MS  
Foot & Ankle Services, Indian Spinal Injuries Centre, New Delhi, India.  
(Email: drshah323@gmail.com)

Received: 11 June 2020; Accepted: 01 July 2020.  
doi: 10.21037/aoj-2019-fa-08  
View this article at: http://dx.doi.org/10.21037/aoj-2019-fa-08

doi: 10.21037/aoj-2019-fa-08

Cite this article as: Panchbhavi VK, Singh MS. Foot and ankle reconstruction—enigmas eluding solutions. Art of Surg 2020.