

After a Cast (leg)

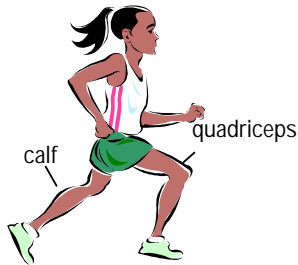


L'Hôpital de Montréal pour enfants
The Montreal Children's Hospital
Centre universitaire de santé McGill
McGill University Health Centre

Your leg is out of a cast. Hooray! A cast was placed around your leg to prevent movement of the joints and muscles to allow the fractured bone and/or injured tissues to heal in a good position.

What to expect:

When the cast is removed, it is not unusual to experience some pain, swelling and stiffness of the joint for a few days and notice atrophy of the leg muscles (calf and quadriceps) for a few weeks.



There will also be dry scaly skin around the leg. Do not rub it; it will gradually fall off. Wash in warm soapy water and apply body lotion daily.

Crutches can be used for partial support but you can begin walking on your leg as soon as it is comfortable enough or as per the advice of your doctor.

You may be limping on the injured foot for a few weeks after removal of the cast. It can be sore when you walk long distances. The muscles of your leg are weaker, especially the calf muscle. Therefore, as you walk, you may have the tendency of turning your foot outwards and lifting it with the hip. As your calf muscle gets stronger your foot will be turning in more towards the midline and will help decrease your limp.

Try to walk with the foot as straight as possible as this will help improve the strength of your calf muscles.

Rehabilitation:

An important part of the treatment after cast removal is early rehabilitation. It will encourage recovery and help prevent re-injury and/or chronic problems. Physiotherapy is the best way to improve the strength and flexibility of your leg, retrain your balance and help you return to activity within a few weeks.

An exercise program is provided for you to begin the initial phase of rehabilitation. For assistance with these exercises and for further evaluation and treatment, you can consult a physiotherapy service within your area.

Trauma

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Begin with these exercises: 2x / day after removal of a cast.

1)



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- Sitting or lying
- Bend ankle up and down slowly.
- Repeat 20 times each movement.

2)



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- Sitting or lying
- Move ankle side to side slowly.
- Repeat 20 times each movement.

3)



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- Sitting or lying
- Rotate ankle slowly, big circles.
- Repeat 20 times, each direction.

4)



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- Sitting with injured leg straight out in front
- Put a towel around foot.
- Hold towel and push toes into it.
- Hold 5 seconds.
- Repeat 10 times.

5)



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- Sitting with injured leg straight out in front
- Put a towel around foot.
- Gently pull foot towards body with towel. Feel the stretch in calf.
- Hold 10 seconds. Relax the foot. Repeat 10 times.

Add these knee exercises if your leg had an above-knee cast removed. Continue these exercises 1x/day when you are able to walk without assistance.

1)



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- Lying down
- Bend hip and knee towards chest.
- Pull it in with hands.
- Hold 10 seconds, repeat 15 times.

2)



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- Lying or sitting with leg straight
- Place can or large towel under knee.
- Point toes towards you, lift heel off ground and straighten knee.
- Hold 5 seconds, repeat 3 x 10 times.
- Gradually add a weight around the lower leg (0.5kg-2.5kg), (1-5 lbs).

Begin these exercises 1x/day when you are able to walk without assistance:

1)

- Sitting or lying, with injured foot in the air, draw the alphabet with the foot.

2)



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- Go up and down on toes slowly.
- Hold 3 seconds.
- Gradually shift more weight on injured leg.
- Repeat 2-3 x10 times
- Progress to only injured leg at a time.

3)



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- Hands on a wall
- Injured leg straight behind you
- Good knee bent in front
- Stretch calf of injured leg gently.
- Hold 30 seconds.
- Repeat 2 times.

4)



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- Stand on injured foot.
- Hold as long as you can. Practice for 3 minutes.
- Progress by throwing ball off the wall while standing on injured foot as long as you can. Practice for 5 minutes.

After a workout of the injured ankle, apply ice with compression for 15 – 20 minutes to help prevent inflammation and soreness.

If there is no appreciable improvement (i.e.: decreased pain and swelling, improved ankle motion, walking without a limp) in one month, seek further medical attention.

Return to activity:

Follow your doctor's recommendations.

You can return to activity when there is:

- Full range of motion of the ankle
- Good strength of the muscles around the ankle
- Good balance (able to stand on injured ankle for >20 seconds and able to hop on it 10x)
- No pain or swelling noted with exercise

You can then begin to run gradually in straight lines. Progress to doing zigzags and figure 8s. If these activities are pain free, return to sports gradually.

