

Therapies Department

Helping your ankle to recover after cast removal

October 2021

Great Staff – Great Care – Great Future

Introduction

This leaflet has been produced to give you general information. Most of your questions should be answered by this leaflet. It is not intended to replace the discussion between you and the healthcare team, but may act as a starting point for discussion. If after reading it you have any concerns or require further explanation, please discuss this with a member of the healthcare team.

Caring for your skin

Skin often becomes very dry and flaky under a plaster cast. Once removed it is advisable to wash and moisturise the area. This process can be repeated daily until the skin returns to normal. If you have a wound, please check that you are able to get this wet. If you have a scar from surgery, firmly massage the area with moisturiser for a few minutes every day, to ensure a mobile, well healed scar.

Pain

Now the cast has been removed, it is common to experience pain. This is entirely normal but should reduce as the joint flexibility improves. Your doctor can prescribe you pain relief medication and taking these regularly, as advised can address the pain. If your pain becomes severe or constant you should contact your doctor for advice.

Swelling

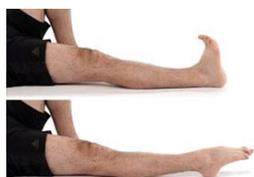
Swelling may continue for several months particularly in the ankle. Regular exercising of your affected limb together with **elevation** of the leg when resting can help address this.



Exercises

It is recommended that you exercise your ankle as soon as you can after your cast has been removed. As you start to exercise and regain normal movement in the ankle, the feeling of stiffness, pain and swelling will gradually reduce.

Ankle exercises are most effective if practiced regularly and not just once per day. You should try to perform the following exercises 3 to 4 times every day.



1. Ankle dorsi flexion/plantar flexion

Point your toes up and then down as far as you can. Repeat 10-20 times.



2. Calf stretch

Keeping your knee straight, use a towel to pull your foot upwards until you feel a stretch in your calf. Hold the stretch for 10 seconds and repeat 10 times.



3. Ankle Inversion / Eversion

Bring your forefoot up and in (soles of your feet in), and then bring your forefoot up and out (soles of your feet away from each other). Repeat 10-20 times



4. Rotational ankle movements

Rotate your ankle 10 -20 times in each direction.



5. Seated plantar flexion

Keep your heel on the ground, lift your forefoot up as high as you can. Return to the starting position. Repeat 10-20 times.



6. Seated dorsi flexion

Flex the ankle to go up onto the tip of your toes, raising the heel off the ground. Lower and Repeat 10-20 times.

Walking

The hospital staff will inform you how much weight you can place through your leg and provide you with a walking aid if required. Try to walk as normally as possible

Physiotherapy

If symptoms persist post cast removal despite regular exercise as recommended above, you can self-refer to Physiotherapy.

Hull GP patients: **(01482) 300003**

East Riding GP patients: self-refer at www.chcpmsk.org.uk or telephone **(01377) 208300**

Children and Young Adults under the age of 18 should call fracture clinic on **(01482) 674378 or (0148) 674909** where an appropriate plan can be made.

If you have an urgent query regarding your symptoms, following the removal of your cast, please telephone fracture clinic on **(01482) 674909 or (01482) 674378**

Information about you

We collect and use your information to provide you with care and treatment. As part of your care, your information will be shared between members of the healthcare team, some of whom you may not meet. Your information may also be used to help train staff, to check the quality of our care, to manage and plan the health service and to help with research. Wherever possible we use anonymous data.

We may pass on relevant information to other health or social organisations that provide you with care. All information is treated as strictly confidential and is not given to anyone who does not need it. If you have any concerns please ask your doctor, or the person caring for you.

Under the General Data Protection Regulation and the Data Protection Act 2018 we are responsible for maintaining the confidentiality of any information we hold about you. For further information visit the following page: [Confidential Information about You. www.hey.nhs.uk/privacy/data-protection](http://www.hey.nhs.uk/privacy/data-protection)

If you or your carer needs information about your health and wellbeing and about your care and treatment in a different format, such as large print, braille or audio, due to disability, impairment or sensory loss, please advise a member of staff and this can be arranged.

This leaflet was produced by the Physiotherapy Department, Hull University Teaching Hospitals NHS Trust and will be reviewed in **October 2024**.

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