

# Tarsal Tunnel Release

## INTRODUCTION

The tarsal tunnel is located on the inside of the ankle, and is formed by the ankle bones and a band of tissue called the flexor retinaculum. The posterior tibial artery, vein and nerve travel through the tarsal tunnel, along with some of the flexor tendons to the foot.

Tarsal tunnel syndrome is caused by compression of the posterior tibial nerve and/or its branches as it travels through the tarsal tunnel. Compression of the posterior tibial nerve can cause pain, tingling or numbness in the foot. Sometimes tarsal tunnel syndrome is caused by a space occupying lesion, like a ganglion or cyst, directly compressing the nerve.

## THE SURGERY

Tarsal tunnel release involves a number of steps:

- General anaesthetic and IV antibiotics
- Tourniquet around the thigh
- Incision over the posteromedial ankle
- Release of the flexor retinaculum (ie the roof of the tarsal tunnel)
- Exploration of the tibial nerve and blood vessels to release them as required
- Careful dissection and excision of any lesion, if needed, and sending of tissue for pathology review
- Irrigation of wound and closure with sutures
- Local anaesthetic block
- VACOCast boot

## GUIDELINES FOR POST-OP RECOVERY

### HOSPITAL ADMISSION

- In hospital for 1 night, non-weightbearing on day of surgery

### FIRST 2 WEEKS

- Elevate foot and rest
- Full weightbearing as tolerated in the surgical boot (unless told otherwise by Dr Zilko)
- Vitamin C 1g and aspirin 100mg per day
- Crutches for balance and support if required
- Dressings to stay dry and intact
- Strong painkillers as required

### 2 WEEK POST-OP APPOINTMENT

- Review by nurse for removal of dressings & sutures
- Follow-up of pathology results

### AFTER POST-OP APPOINTMENT

- Transition to normal supportive shoes
- Daily scar massage from 3 weeks
- Return to most activities from 6 weeks
- Podiatry review for rehab if required
- **REHAB - PODIATRY/PHYSIOTHERAPY:**
  - Joint mobilisation, soft tissue manipulation, nerve desensitisation

*Every patient's recovery is individual and depends on the severity of the injury/disease and complexity of the surgery. Given that tarsal tunnel syndrome is nerve compression by definition, sometimes the nerve function does not fully recover, even after surgery.*