

Acute correction of rigid drop foot deformity can be problematic due to the skin defect that may occur in the medial part of the ankle. The purpose of this study is to present an innovative solution for this problem. We hypothesized that acute correction for rigid ankle contractures without arthrosis might be possible if the medial skin defect could be closed. Therefore, we described a surgical technique for acute functional correction of rigid drop foot deformities. The closure of the medial defect was performed by applying a flap and partial-thickness skin graft. We have retrospectively evaluated the results of 18 patients who were treated between 2010 and 2016 with this technique. The mean age of the patients was 37 \pm 9.5 (22-56) years. Foot drop etiology was firearm-related nerve injury. Corrections were performed after 14.6 \pm 7.9 (8-38) months following the injury. At the end of an average follow-up period of 44.4 \pm 6.2 (37-60) months, 14 of 18 patients (78%) recovered without complications, 3 patients experienced partial loss in the medial skin graft region, and 1 patient developed a superficial infection. None of the patients have developed pes planus. We observed that the ankle flexion contracture, which was 34° \pm 9.2° (20°-50°) preoperatively, could reach an average of 2.2° \pm 2.5° (0°-6°) dorsiflexion after surgery. We suggest that acute correction and tibialis posterior tendon transfer in the treatment of rigid foot drop deformity can be performed with an effective skin closure with low soft tissue complications.

[Yayına ulaşmak için tıklayın - Düşük Ayak](#)