

(Refer to page 351)

Answer: Open dislocation of talus

Total dislocation of talus is a rare injury. It is also described in the literature with other names such as pantalar dislocation, talus extrusion and talus enucleation.¹⁻⁴ It represents about 3-4 % of all ankle dislocations. In most cases, there is an open injury and is usually associated with other injuries around the ankle such as malleolar fractures, tarsal bone fractures and vascular injury. This type of injury is a result of high energy trauma to the hindfoot especially when the forces are acting on an everted and plantar-flexed ankle. Anterolateral dislocation is the most common variant.^{1, 2}

The main concern with this type of injuries are avascular necrosis of talus and infection. Presence of either one will result in severe morbidity.

Talus being the only bone in the lower limb with no muscle attachments, receives its blood supply from dorsalis pedis artery. The supply to the head is mainly from the anasto-

Vascular compromise can occur due to disruption of blood supply directly due to damage to the feeding vessels or as a result of compartment syndrome following severe soft tissue injury.

The objective of management in the acute setting is to reduce the risk of AVN and infection. Early reduction of dislocation and meticulous debridement of wound should be done as soon as possible in order to reduce the potential complications.^{1, 4}

Broad spectrum antibiotic is indicated and second look debridement should be performed after the initial debridement.

Primary talectomy is not recommended as the outcome is much inferior as compared to combination of fusion and talectomy. Talus excision will cause severe morbidity to patient as talus is an intercalary unit in maintaining hindfoot. Talar resection and or tibio-calcaneal arthrodesis is only to be considered in the event of avascular necrosis, severe osteoarthritis or uncontrolled infection.¹⁻³

REFERENCES

- 1:** Burston JL, Isenegger P, Zellweger R. Open Total Talus Dislocation: Clinical and Functional Outcomes: A Case Series. *J Trauma.* 2010; 68:1453-8.
 - 2:** Popovic M. Total dislocation of the talus. *EEXOT* 2009; 60:182-5.
 - 3:** Fleming J, Hurley KK. Total talar extrusion: a case report. *J Foot Ankle Surg* 2009; 48: 690:e19-e23.
 - 4:** S Heylen, T De Baets, P Verstraete. Closed total talus dislocation: a case report. *Acta Orthop Belg.* 2011; 77:838-842.
-