

## POSTOPERATIVE REHABILITATION GUIDELINES FOR CLOSING WEDGE HIGH TIBIAL OSTEOTOMY

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STAGE	AIMS	TREATMENT GUIDELINES
Stage I	<ul> <li>To facilitate bony union of fracture site</li> <li>To retain range of motion</li> </ul>	<ul> <li>Remain touch weight bearing on crutches until at least 4 weeks</li> <li>Brace to remain on at all times until 6 weeks postop</li> </ul>
Acute Recovery	<ul> <li>Minimise concurrent postoperative complications</li> </ul>	<ul> <li>Instruction regarding use of crutches</li> <li>Reduction of swelling and pain using ice, elevation and co-contractions</li> </ul>
Week 1-4	<ul> <li>Minimise muscular atrophy</li> </ul>	<ul> <li>Active non-weight bearing range of motion exercises to encourage ROM</li> <li>Static co-contraction exercises at full extension, 30 and 60 degrees knee flexion</li> </ul>
Stage II	Facilitation of bony union through PWB	Continue exercises as above
4-6 Weeks	<ul> <li>Minimise concurrent postoperative complications</li> </ul>	<ul> <li>Commence partial weight bearing within pain free threshold. May progress to full weight bearing by week 6 if instructed</li> <li>Gait retraining with crutches focusing on correct heel strike/toe off</li> </ul>
Stage III	Restoration of normal gait pattern	Gait retraining focusing on correct heel strike/toe off and VMO activation during stance
6-12 weeks	<ul> <li>Ability to weight bear dependant on x- ray appearance</li> <li>Restoration of muscular strength and range of motion</li> </ul>	<ul> <li>Aim for a full range of motion using active and passive techniques</li> <li>Encourage VMO activation with co-contraction and biofeedback techniques. Progress by increasing repetitions, length of contraction and dynamic conditions</li> <li>Hamstring strengthening with static weight bearing co-contractions progressing to active free hamstring contractions then to resisted hamstring strengthening</li> </ul>
		<ul> <li>Gym equipment can be introduced such as stationary bike (encourage daily), stepper, leg press, mini trampoline, cross trainer with minimal resistance</li> </ul>
		<ul> <li>Pool work starting with deep water running. Swimming with pool buoy progressing to free kicking</li> <li>Muscle tightness can be addressed with soft tissue techniques and stretching particularly hamstrings and calf muscles</li> <li>Open chain exercises should be avoided, rather use closed chain exercises performed with co-contraction of hamstrings and quadriceps which lessen the patello-femoral joint forces and ensure more functional stresses on the joint and entire limb</li> <li>Once sufficient quadriceps strength commence functional eccentric quads exercises such as steps downs starting with a ~10cm high platform and increasing height as progresses</li> </ul>
		• Treat beyond the knee joint for any deficits, e.g. gluteal control, tight hamstrings, ITB, gastrocs and soleus, etc.
Stage IV	<ul> <li>Continuation of functional rehabilitation</li> </ul>	<ul> <li>Progress co-contractions to more dynamic movements, e.g. step lunges, half squats, wall squats</li> <li>Start cycling on normal bicycle</li> </ul>
12 Weeks +		<ul> <li>Progress resistance on gym equipment such as exercise bike, rower, cross trainer</li> <li>Ensure successful gait restoration or continue instructions as above</li> <li>Pool work can include using flippers.</li> </ul>