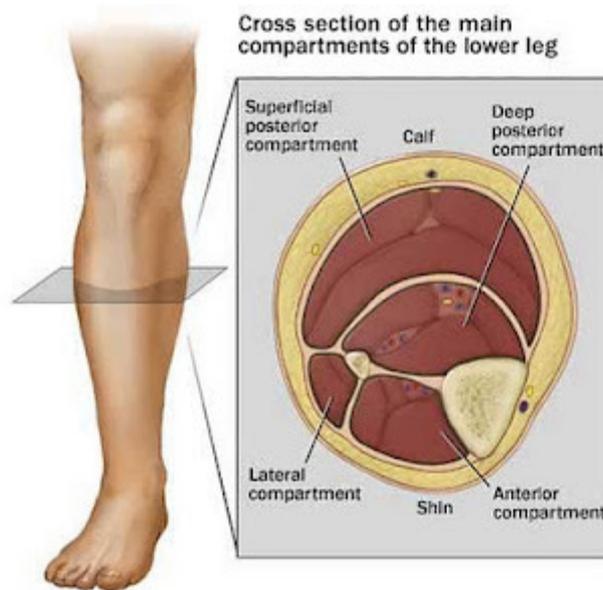


## FASCIOTOMY SURGERY

### Exertional Compartment Syndrome

Your lower leg is divided into 4 compartments by partitions between the two bones. The muscles within these compartments are surrounded by tissue known as fascia. When you exercise, blood flow to your muscles increases and your muscles swell. In exertional compartment syndrome, the fascia is too tight to allow this swelling and the muscles become swollen to the point where the blood flow becomes interrupted. The lack of blood flow causes the muscles to become starved of oxygen and this causes pain. Stopping the exercise leads to a decrease in the pressure within the compartments, allowing the blood flow to resume and the pain usually goes away quickly. Sometimes the pain will respond to activity modification, physiotherapy and shoe wear adjustments. Sometimes no matter what you do the pain does not go away and if this is the case, surgery to increase the volume of the compartment by splitting the fascia becomes an option.



© Mayo Foundation for Medical Education and Research. All rights reserved.

### The Operation - Fasciotomy (release of the tight fascia)

Fasciotomy involves making incisions over the tight compartments in the leg in order to release the tight fascia enclosing the muscles. The incisions vary in length and number depending on the surgeon's preference and which compartments need releasing. Releasing the fascia usually means that the muscles will now have adequate room to swell when you exercise. Most fasciotomy surgery will require you to stay in hospital for one night. You will be given a time and a date for your surgery along with any special instructions. Both the surgeon and the anaesthetist will see you before the operation. They will explain the procedure and ask you to sign a consent form. You should confirm what leg is to be operated on (fasciotomy surgery usually involves both legs but not always). You should also ask for more information if you wish.

At the end of the procedure the wounds are usually injected with local anaesthetic to help with pain relief. A small drain is placed to collect bleeding – this will be removed before you leave hospital. Finally a padded bandage is applied over dressings to seal off the wounds.



The incision is made between the 2 marks on the leg as seen above and is usually between 8-10cm long.

### After the Operation

You will remain in hospital overnight with your legs elevated. Most people will go home the next day once the drains are removed. When you leave the hospital you should have an appointment card with a time for your follow-up check at the clinic; if not, telephone to make an appointment. Although you will be able to walk after the operation you will be given crutches and advised to spend as little time on your feet as possible. This is especially important in the first week following surgery to decrease the chances of the legs swelling and causing problems with healing of the wounds. The bandages are left on until you are seen in clinic, usually 7-10 days after the operation. If you wish to shower or bathe, tape a plastic bag over your knees to stop the wounds getting wet.

When the anaesthetic wears off you should expect some pain in the legs but this should not be severe. If you experience pain you should take the tablets provided and elevate the legs. If the bandage feels too tight it can be taken off and reapplied more loosely.

If you have a sedentary job and the wounds are healing nicely you may return to work after 10-14 days. If your job involves heavy manual labour you should wait to receive clearance from your surgeon. You should be able to drive a car when you have full control of your legs and your wounds are healed.

### Complications

Possible complications of fasciotomy include anaesthetic complications and wound healing problems arising from infection or bleeding, which can in turn lead to unsightly scarring. At your first clinic follow up appointment you will be advised to place a hypoallergenic paper tape on your wounds to help minimize scarring. Deep vein thrombosis (DVT) or blood clots in the calves is also a risk and it is possible that you may have some numbness around the wounds or on the foot, but this usually becomes less noticeable with time. There is also a small chance that the surgery does not relieve all of your symptoms.