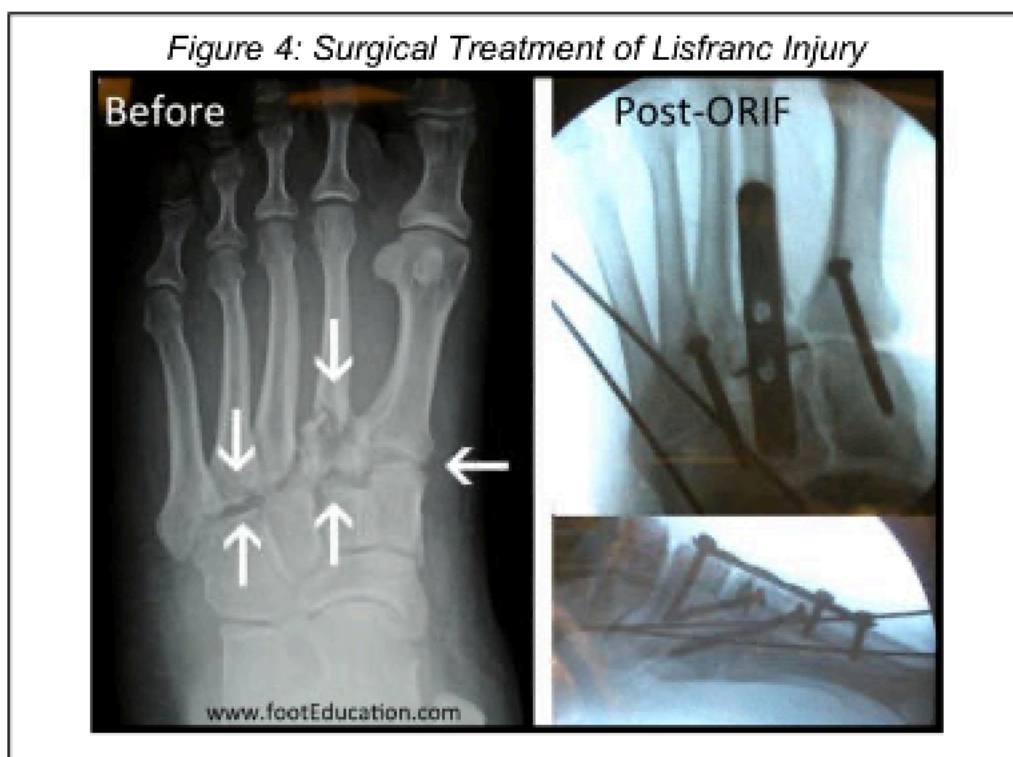


# Midfoot Sprain Versus Lisfranc Injury (Midfoot Dislocation +/- Fracture)

Department of Orthopedics  
Foot & Ankle CU Medicine

---

**Displaced or Unstable Lisfranc injuries** are usually treated surgically. Surgery is performed to restore joint alignment and stabilize the joint(s) with screws, pins, and sometimes plates (Figure 4). This allows the bones and the ligaments to be put back in their proper positions and held in place. This gives the ligaments a chance to heal. In some cases, it is necessary to fuse the involved joints (connect the two bones forever by getting them to heal together as one bone), eliminating the motion altogether. Many of these procedures will involve a second surgery to remove the hardware once the injury has healed. Recovery can take a year or more.



## **Surgical Treatment of Lisfranc Injury**

### Recovery from Surgery

Recovery from Lisfranc injuries are lengthy because the midfoot sees tremendous stress during regular standing and walking. Post surgical treatment and recovery efforts depend upon the nature of the initial injury, what type of surgery is performed, and the surgeon's preference. For a major Lisfranc injury, a typical recovery plan would include:

- 2 to 3 week period of splinted non-weight bearing, until swelling and discomfort settle down, and, if surgery was required, sutures can be removed.
- 6- to 8-week period of slowly increasing weight bearing in a specialized brace or cast.
- Gradual transition to weight bearing as tolerated in a specialized walking boot for an additional 4-8 weeks.
- Wean from the boot to a stiff sole shoe at 10-14 weeks from surgery, perhaps with subsequent use of a custom arch support or shoe insert.

A displaced injury takes many months of recovery. The majority of the recovery occurs in the first 6 months, but it is often a year or more before patients reach their point of maximal improvement.

If the surgical treatment fails or the joint damage from the injury leads to severe arthritis, then a fusion (arthrodesis) of the Lisfranc joints may be necessary. Despite the stiffness of a fused joint, most patients with successful fusion of the midfoot joints have good function of the foot.