SYME'S AMPUTATION: RESULT AFTER FORTY-FOUR YEARS

Report of a Case

A. H. C. RATLIFF, BRISTOL, ENGLAND

In May 1920 a man aged thirty-nine sustained a fracture-dislocation of the left ankle when stepping off a kerb. The fractures united in a position of deformity. Pain and weakness of the ankle persisted. He was admitted to the Bristol Royal Infirmary on July 11, 1921, when it was noted that the left foot was displaced outwards and everted and the medial malleolus was prominent. On the next day a Syme's amputation of the left foot was performed

FIG. 1

Prosthesis made by this patient and worn for forty-four years.

FIG. 2

A recent photograph of the stump. There was no evidence of vascular insufficiency.

by Mr Rendle Short. A precise description of the operation is available. A classical amputation was carried out and the lower end of the tibia was divided just above the tibial articular surface. A drain was inserted for three days, convalescence was uneventful and the patient was discharged home on August 4, 1921. The patient made his own prosthesis: it consisted of two leather gaiters attached to a block of wood with a piece of rubber on the under aspect

(Fig. 1). He has used this appliance for forty-four years and only recently attended hospital, in 1965, because he wished to obtain a new prosthesis.

He has had various occupations since 1921, the longest being that of a cook in a hotel for twelve years. He retired at the age of sixty-five and is now eighty-four. He has no complaints apart from aching in the stump in wet weather; occasionally he finds that he cannot walk more than three miles without discomfort. The stump is still in excellent condition, mobile, central and not tender (Fig. 2). When wearing his prosthesis he walks with alacrity and despite his age can hop and dance.

Comment—Shelswell (1954) reviewed 305 Syme's amputations in 302 patients. The main causes of failure, requiring re-amputation and occurring in about 25 per cent of all cases, were sepsis as an early complication, and vascular insufficiency as a later complication. This case is remarkable because of the long period of observation and the absence of any sign of vascular insufficiency in a man now aged eighty-four.

REFERENCE

SHELLOWELL, J. H. (1954): Syme's Amputation. *Journal of Bone and Joint Surgery*, **36-B**, 507.