



# A CASE DISCUSSION ON RIGHT SIDED CALCANEO-CUBOID TALO-NAVICULAR AND SUBTALAR ARTHRITIS

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**Abstract:** Arthritis is an auto immune disorder which can cause inflammation, tenderness, swelling, stiffness and pain at the site of joints that can worsen according to age. Pain (intermittent or sharp), swelling, flare, physical deformity, redness, fatigue, malaise, difficulty in walking, muscle weakness indicates arthritis. A reduction in the normal amount of cartilage tissue, when immune system attacks your own body causes arthritis. Usually these condition should be diagnosed with clinical symptoms, RF (rheumatoid factor), ANA (anti nuclear antibody), X-ray, CT scan, MRI. Arthritis can be treated with NSAIDS, Steroids, Analgesics, Immune suppressives, replacement surgeries and supportive measures.

**Key Words -** Calcaneo-cuboid, Talo-navicular, Triple-arthrodesis.

## I. INTRODUCTION

Arthritis is an auto immune disorder and an inflammation that causes stiffness, pain and deformity of bones. Clinical findings of this condition include redness, tenderness, fever, local rise in temperature, intermittent or sharp pain, swelling, difficulty in walk, morning stiffness of joints.

Risk factors include age, obesity, previous joint injuries, family history, social habits, environmental exposure, occupation and other complications.

**Treatment of this condition includes**

**Therapy:** Streching, Acupuncture and Physiotherapy.

**Medications:** NSAIDS, Steroids, Analgesics, Immune suppressives.

**Surgery:** Replacement surgeries, Arthrodesis.

## Case report:

A male patient of age 33 years admitted with complaints of pain and swelling over right foot since six months with history of TB, pneumonia five years back. He was evaluated with Right foot, CBP, Viral markers, X-ray which reveals right sided calcaneo-cuboid talo-navicular and subtalar arthritis.

Based on clinical and haemo-dynamical evaluation this patient was diagnosed to have RIGHT SIDED CALCANEO-CUBOID TALO-NAVICULAR AND SUBTALAR ARTHRITIS.

During the hospital stay he was advised to undergo triple arthrodesis surgery and treated with analgesics, PPI, Anti edema drugs, antibiotics, antipyretics, vitamin supplements and supportive measures. Triple arthrodesis was done uneventfully on third day of admission. Patient was managed with post op antibiotics, analgesic therapy. With these measures patient improved clinically and hemo-dynamically stable at the time of discharge.

**Management:**

s.no	Brand	Generic	Category	Dose (mg)	Route	Freq
1.	Tab. Zerodol p	Aceclofenac +paracetamol	Analgesic	150+500	po	BD
2.	Tab.Chymerol forte	Trypsin&chymotrypsin	Anti edema	1 tab	Po	Tid
3.	Tab.Shelcal-Hd	Calcium supplement	Vitamin supplement	1 tab	Po	OD
4.	Tab. Pantop	Pantoprazole	PPI	40mg	Po	OD
5.	Inj. Ciplox	ciprofloxacin	Cephalosporin antibiotics	500mg	IV	BD
6.	Inj. clindamycin	Clindamycin	Antibiotic	300mg	IV	BD
7.	Inj. Diclo	Diclofenac	Analgesic	75mg	IM	BD
8.	Tab. Limcee	Vitamin-C supplement	Vitamin supplement	1 tab	PO	OD
9.	Tab. Calinta Frac	Calcium supplement	Calcium supplement	1tab	PO	OD
10.	Tab. Dolo	Paracetamol	Antipyretic	650mg	PO	BD

Triple arthrodesis was done on third day of admission. It is a surgical procedure which was done to relieve pain in the rare parts of the foot and improve stability of foot. In some cases, it is also done to correct deformity of foot by many reasons like fusing of three main joints of the hindfoot such as sub-talar joints, calcenocuboid joints and talo-navicular joints. Procedure was done under aseptic conditions. Post procedure was uneventfull.

Patient recovered with decreased symptoms so that he was discharged on tenth day of admission with medications Tab.Methotrexate, Tab. Zerodol-P (SOS), Tab. Calinta Frac (OD). However, in view of his nature of illness he was advised to review after one month.



**Fig 1:** Right sided calcaneo-cuboid talo-navicular and subtalar arthritis (post surgery image)

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