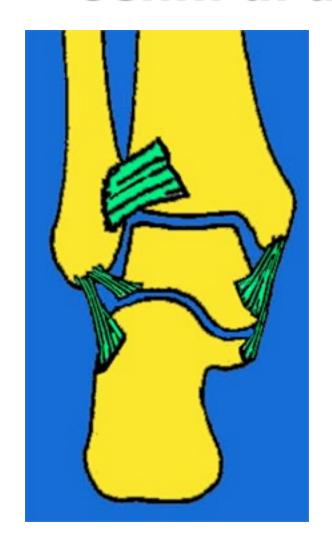
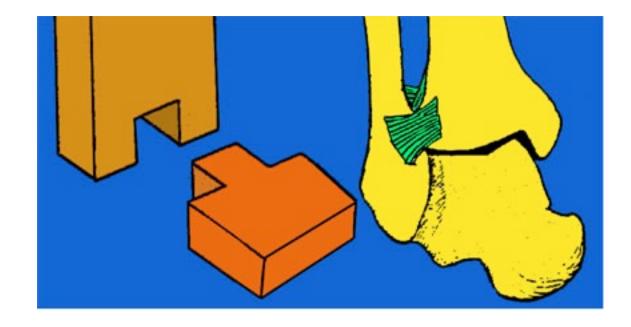
Traumatologia della caviglia

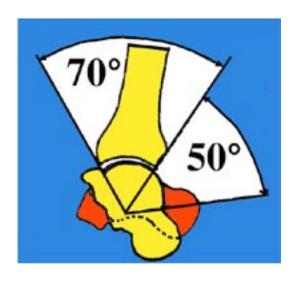
Distorsioni della caviglia

Cenni di anatomia





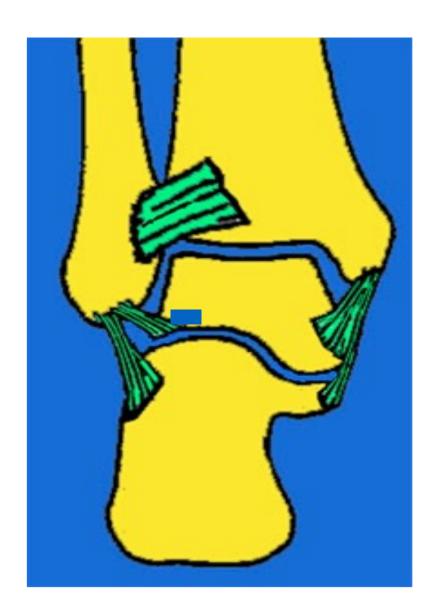
Mobilità della caviglia

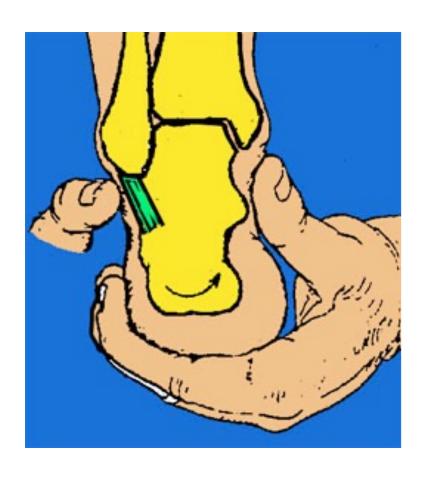


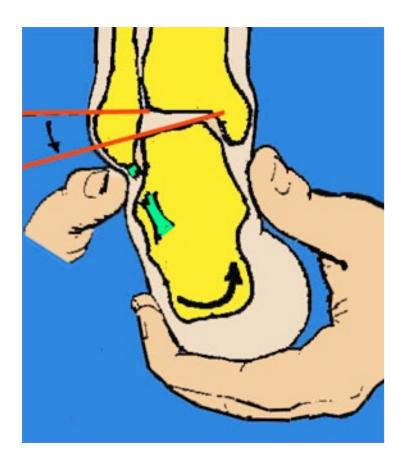


Cenni di anatomia dei legamenti della caviglia

peroneo-astragalico anteriore peroneo-astragalico posteriore peroneo-calcaneare

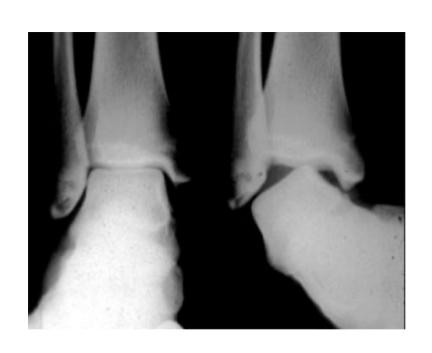






Radiografie dinamiche

(misure comparative dei 2 lati)

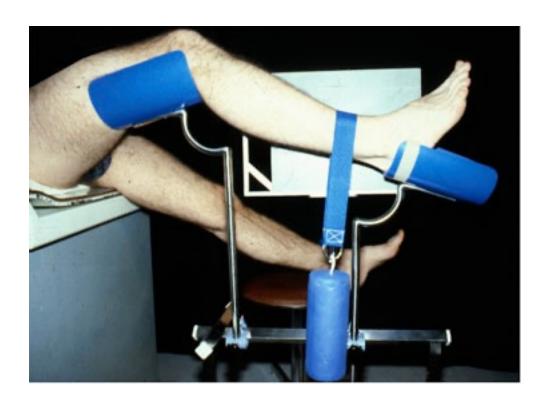




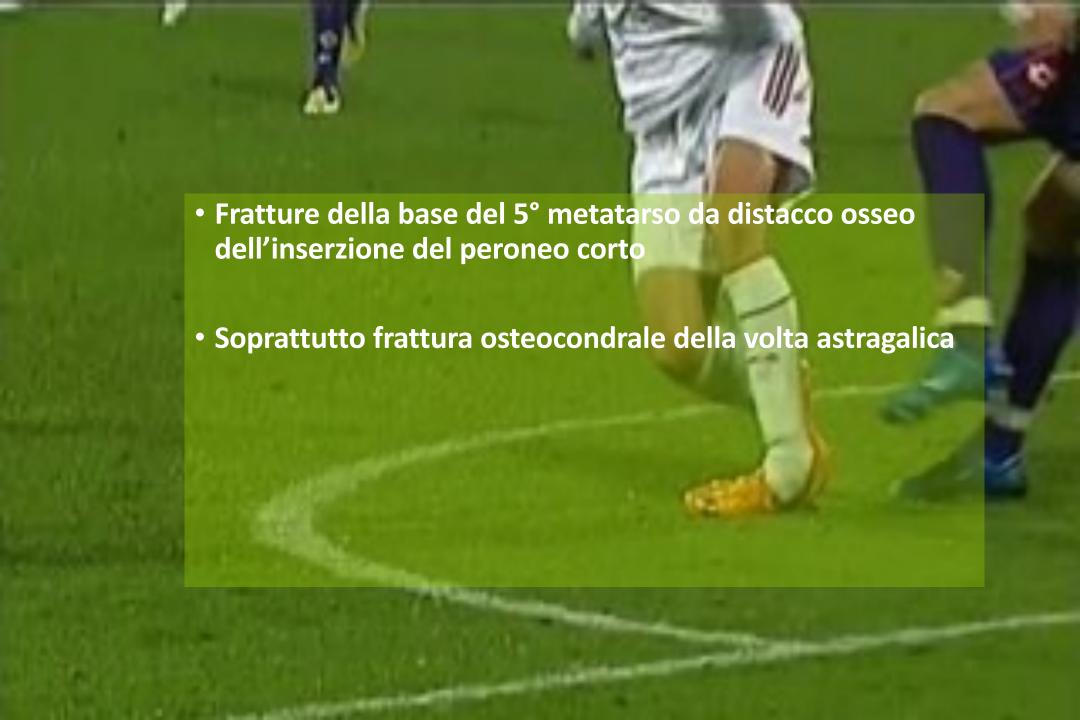
- 10 à 15°: rottura del peroneo-astragalico anteriore
- 20 à 25°: rottura dei 2 fasci

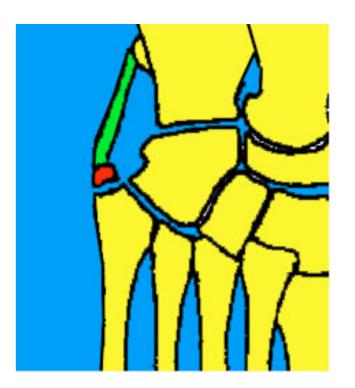
- 30° : rottura dei 3 fasci









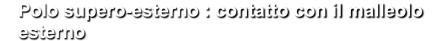






Lesioni associate: Fratture osteocondrali della volta astragalica







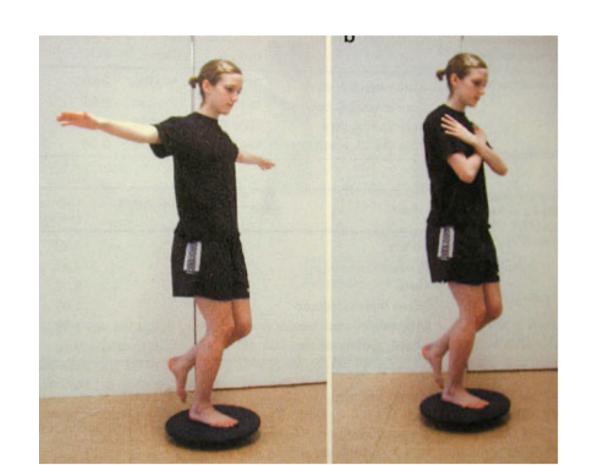
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Le rotture esterne possono arrivare fino alla lussazione della caviglia



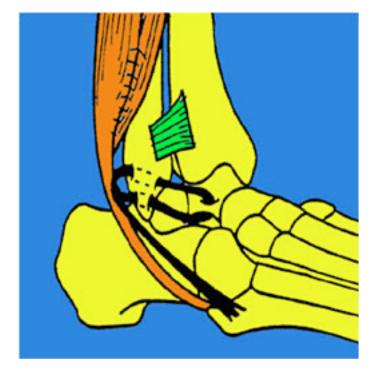


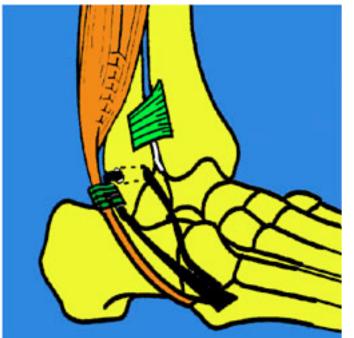
IL trattamento delle lussazioni della cavilglia



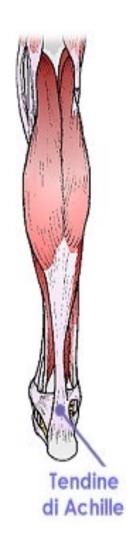
Il trattamento chirurgico

Evoluzione

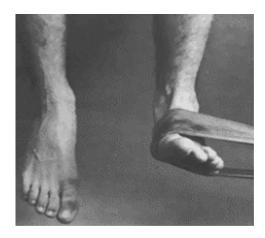


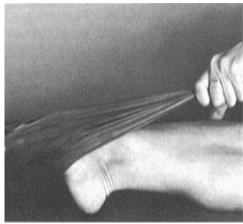


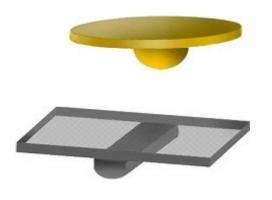
PATOLOGIE DEL TENDINE DI ACHILLE



Trattamento



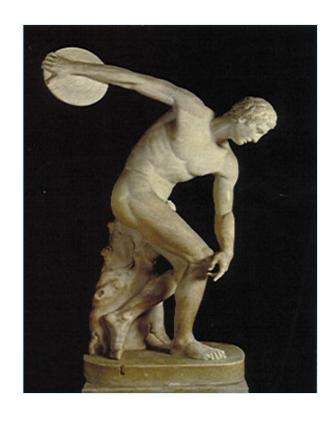


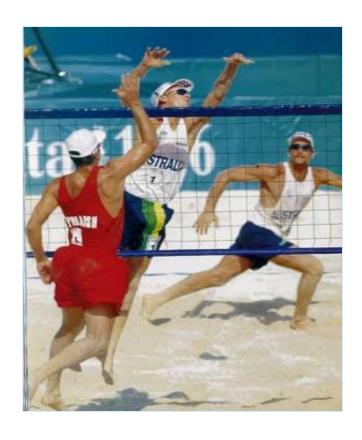




LA CAVIGLIA INSTABILE POST-TRAUMATICA









		RADIO-DINAMICHE		ANATOMIA	
GRADO	CLINICA	VARO	ANTERO- PULSIONE	PATOLOGICA	
0	 modesta tumefazione talvolta piccolo ematoma laterale dolenzia premalleolare laterale 	10°	5 mm	non rotture legamen- tose	
1	 tumefazione laterale crepitante con ematoma dolore angolo peroneo-tibiale carico con dolore 	10°-15°	8 mm	rottura isolata PAA	
2	 — ematoma laterale-mediale — dolore sotto- e pre-malleolare — aumento mobilità laterale — zoppia 	20°-25°	10-15 mm	rottura PAA+ PC+AC	
3	 edema+ematoma angolo tibio- peroneale anteriore dolore varizzando cassetto astragalico non appoggio del piede 	30°	15 mm	rottura PAA+ PC+PA ±AC interosseo	

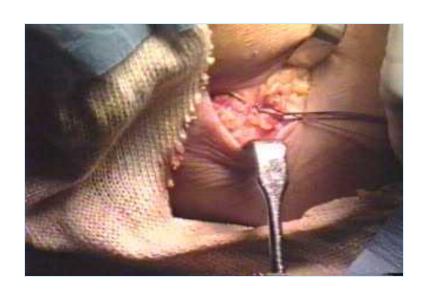




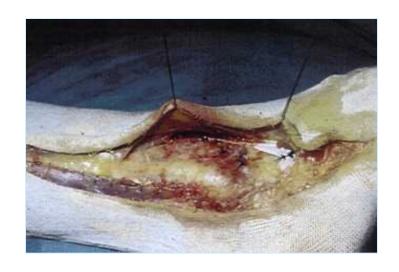








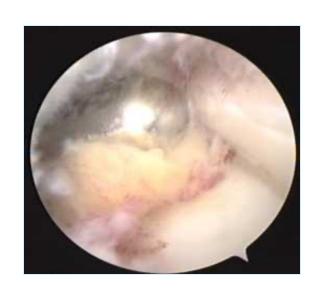


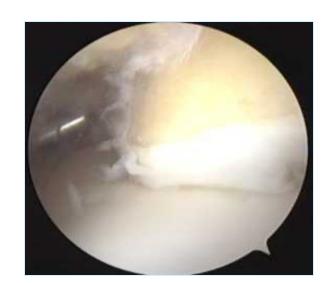












TALALGIA E METATARSOLGIA

CLINICA

TERAPIA