

Fig. E-1
 Charcot joint with tuberculosis infection in a seventy-year-old man (Case 16). **Fig. E-1A** Preoperative lateral radiograph showing a collapsed talar body (arrow). **Fig. E-1B** Lateral radiograph acquired fourteen months after cement arthroplasty with screw fixation. **Fig. E-1C** Anteroposterior radiograph made fourteen months postoperatively, showing a pathologic fracture of the lateral malleolus.

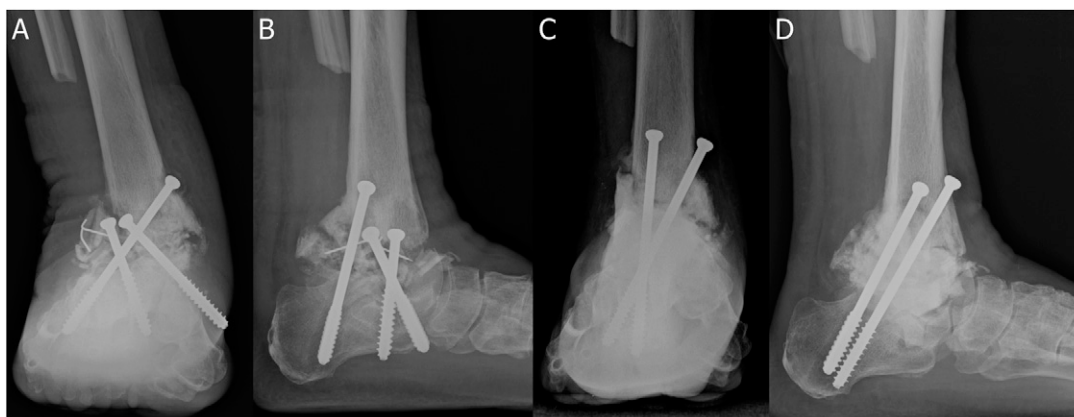


Fig. E-2
 Failed ankle fusion in a seventy-four-year-old man (Case 10). **Figs. E-2A and E-2B** Anteroposterior and lateral radiographs showing the failed ankle fusion (infected nonunion with malalignment) before the cement arthroplasty. **Figs. E-2C and E-2D** Anteroposterior and lateral radiographs made twenty-four months after cement arthroplasty, showing the joint fixed with two screws.

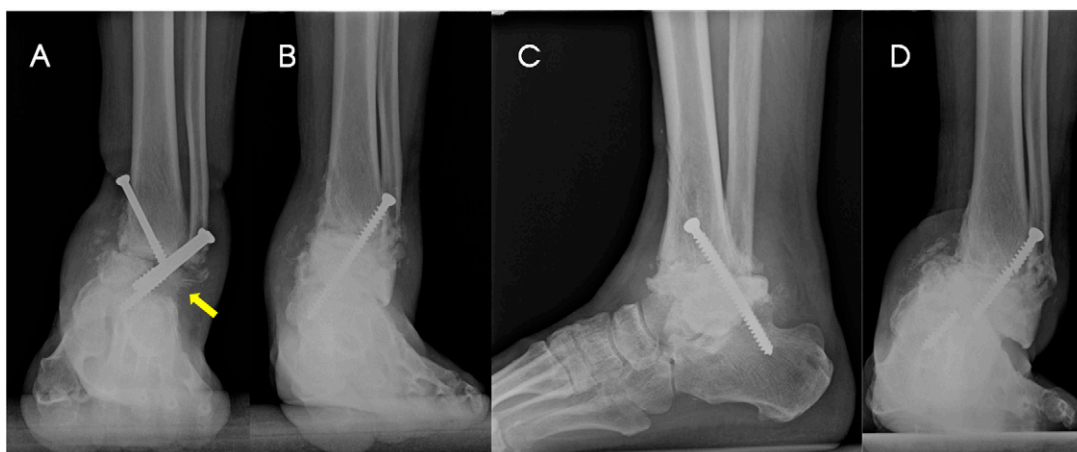


Fig. E-3
 Failed ankle fusion in a sixty-nine-year-old man (Case 13). He had undergone ankle arthrodesis twice. **Fig. E-3A** Anteroposterior radiograph showing nonunion of the ankle joint with osteopenia of the lateral compartment of the talus (arrow). The medial and lateral malleoli were resected previously. **Figs. E-3B and E-3C** Weight-bearing anteroposterior and lateral radiographs made six months after cement arthroplasty with screw fixation, showing that the joint is well aligned. **Fig. E-3D** Standing anteroposterior radiograph, made ten months after cement arthroplasty, showing a medially subluxated talus with a broken screw.

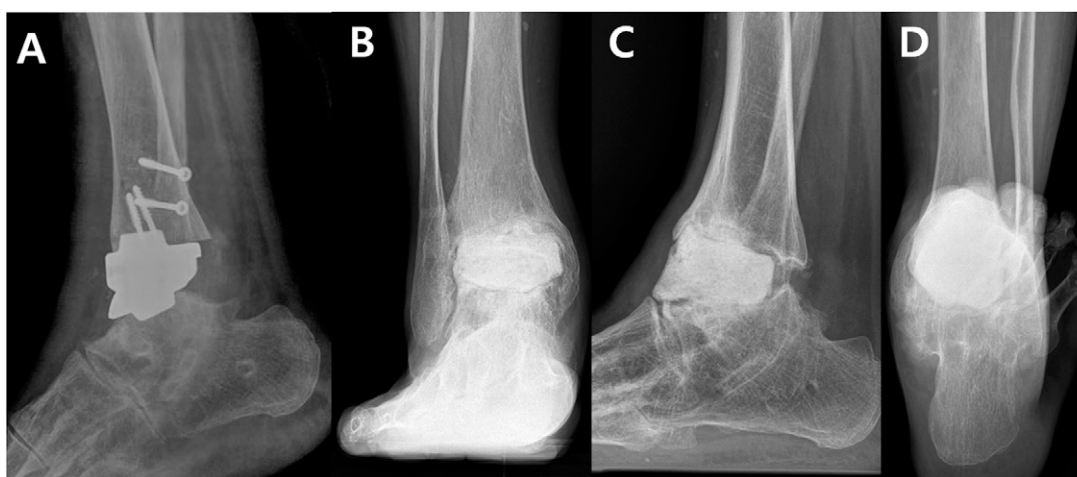


Fig. E-4
 Total ankle replacement complicated by infection in a fifty-five-year-old woman with rheumatoid arthritis (Case 6). **Fig. E-4A** Lateral radiograph acquired three weeks after the total ankle replacement, at which time the site was infected. **Figs. E-4B, E-4C, and E-4D** Anteroposterior, lateral, and hindfoot-aligned radiographs made seventy-two months after cement arthroplasty, demonstrating that the cement has been retained in the joint without evidence of joint malalignment.