

Bunion Surgery

ORTHOSPORTS



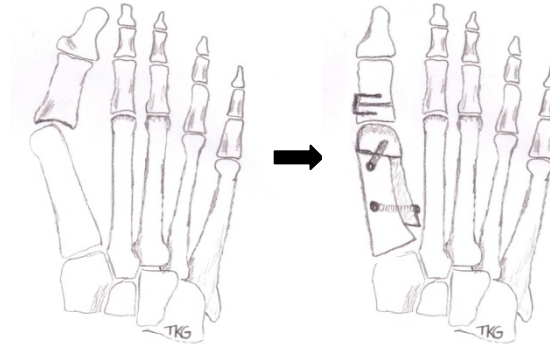
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A prominent bump on the inside of the great toe is commonly called a “bunion”. The medical term is known as **hallux valgus**.

Many muscles attach to the great toe by their tendons to allow control of movement. In a healthy setting these tendons are perfectly balanced, keeping the toe straight. Over time, if the pull is unbalanced, the joint deforms outward, causing a bunion. Once this deformity occurs, the continued uneven pull of the tendons can result in worsening of the deformity over time.



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Pain can develop from pressure due to snug fitting shoes. The deformity itself can cause pain due to pressure on nerves and crowding of the lesser toes.

TREATMENT: Initial treatment includes wearing wider shoes or sandals. Pads or orthotics, obtained from the chemist or podiatrist, may help to alter pressure points and relieve pain. If these measures fail to relieve symptoms, then surgery can be considered. Surgery involves straightening of the crooked toe, narrowing of the foot, and removal of the prominent “bunion”. Surgery should not be performed solely for cosmetic reasons. The appropriate patient for surgery has a painful bunion or worsening deformity. Problems with the lesser toes are also reasons for surgery.

EVALUATION: A history and examination will be taken during your consultation to evaluate if you are a candidate for surgery. Good circulation to the foot is essential, and will be ascertained during the visit.

Weightbearing radiographs of the foot are essential to evaluate the extent of the bony deformity and to assess the presence of arthritis and degree of bone quality. All of these factors are considered to decide which surgical technique will be successful in your unique situation.

CORRECTIVE SURGERY

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A bunion is the result of an imbalance of forces around the big toe. Corrective surgery involves the re-balancing of these forces by cutting and shifting bone, release ligaments and tightening the capsule. A successful correction will restore the alignment of the toe and PRESERVE JOINT MOTION. Motion at the joint has great benefit to you as it allows more normal walking.

I use one of the latest techniques in correction known as the SCARF osteotomy. The bones are cut and shifted to narrow the foot, while the “bump” is removed. Originally described by a Frenchman, Louis Barouk, this technique has produced excellent outcomes.

FUSION SURGERY

The most reliable way to preserve alignment of the great toe is by removing the joint and getting the two bones to heal to each other, known as a fusion. Once the bones heal to each other, they are solid and cannot be moved by the tendons pulling on the toe. When the toe is fused and stiff, walking is near normal. Patients cannot wear high heels. This procedure is performed on patients with severe deformities or poor bone quality.

The surgery will last from one to two hours and requires overnight stay in hospital. Screws are placed across the cut bone to fix the alignment, and they will be left in permanently. Patients are allowed to Heel weight bear on the operated foot/feet. Usually crutches are needed for one week. The repair will be protected in a wooden shoe for six weeks to allow healing. Swelling of the foot may last from six months to one year. There is a 2/3 chance that patients can wear their shoes of choice. The success rate of this surgery is 85%.

COMPLICATIONS SPECIFIC TO HALLUX VALGUS SURGERY

Recurrence of the deformity: Even though the toe may be perfectly balanced during surgery, factors exist that can lead to a recurrence of the deformity. Every patients is different in terms of bone quality, healing potential, scarring, muscle tone. As a result, an imbalance may persist, causing a recurrence. If the hallux valgus recurs, a thorough evaluation of the foot is required to determine the cause of the recurrence. A correction of the recurrence may require further surgery.

Stiffness: Because everyone heals differently, varying amounts of scar tissue may develop around the great toe. There is a 10% chance of getting considerable stiffness after the surgery. This may affect the ability to wear ones shoes of choice.

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