

ARTHRODESIS (Fusion) OF THE 1ST METATARSOPHALYNGEAL JOINT (Big Toe)

Fusion of the great toe is an operation to stiffen the joint at the base of the great toe (first metatarsophalangeal joint), removing bony bumps and correcting any deformity. The commonest reason for fusing the great toe is arthritis of the big toe joint. This may be isolated arthritis of the big toe ("hallux rigidus") or part of a generalised arthritis of the foot (usually rheumatoid arthritis).

A cut is made over the top of the toe and the joint is opened. Any large bony lumps are trimmed. The joint surfaces are cut out, trimmed to enable the toe to sit in the right position, and fixed together with screws and a metal plate. The wound is stitched up and bulky dressings are applied to the area.

If you are having a piece of bone put in for a short floppy toe after previous failed surgery, the bone will be removed from the brim of your pelvis just above the hip. It will be fixed into place using a small plate as well as screws or pins.

Dr Greg Sterling

Surgery of the Foot and Ankle

WILL I HAVE TO GO TO SLEEP (GENERAL ANAESTHETIC)?

The operation is usually done under general anaesthetic (asleep). Alternatively, an injection in the back, leg or around the ankle can be done to make the foot numb while the patient remains awake. Local anaesthetic injections do not always work and in that case you may have to go to sleep if the operation is to be done. Your anaesthetist will advise you about the best choice of anaesthetic for you.

In addition, local anaesthetic may be injected into your leg or foot while you are asleep to reduce the pain after the operation even if you go to sleep for the surgery. You will also be given pain-killing tablets as required.

WILL I HAVE A PLASTER ON AFTERWARDS?

You don't usually need a plaster after a big toe fusion. Usually we will put dressings and a bandage on your foot and you can walk on it in a protective sandal with a stiff sole. However, if your bone is particularly soft or the soft tissue repair of the joint



needs extra protection, a plaster shoe will be put on which you would usually wear for 4-6 weeks.

FOLLOWING YOUR SURGERY

On the Ward - You can go home when comfortable and safe. Using the postoperative stiff-soled shoe provided, you are encouraged to walk but put most of your weight through your heel. This removes the stress from the front of the foot where the surgery took place.

When you go home - It is very important that the leg remains elevated most of the time in the first 2 weeks – rest is important. Do not wet or remove the dressings. It is normal to expect:

- 1. Swelling this can be minimised by elevating your foot above your heart; icing the foot may be helpful
- 2. Pain You will receive a prescription for pain medication on discharge from hospital. Pain can also be minimised by elevating your leg.
- 3. Bleeding This always occurs. You may notice some oozing through the bandages.

Further Appointments - You will be seen again 10-14 days after your operation. The dressings will be removed and the wound examined. Any stitches will be removed. You are encouraged to walk with your weight through your heel for a further 4 weeks. You can now have a shower

Another clinic appointment will be made for 4 weeks later. At this time, the toe will be examined and another x-ray taken. If this shows the toe is fusing, you can stop using the post-operative shoe. If the fusion is not yet solid, you may need to keep using the shoe for a further 3-4 weeks. The process will then be repeated.

How soon can I....

WALK ON THE FOOT?

You can usually do so immediately. Your weight should go through your heel, to avoid pressure through the front of your foot. This will continue for 6 weeks. Go BACK TO WORK?

This depends on what you do and how you get to work. If you have a sitting-down job that you could do with your foot in bandages, and you can get to work, you could probably go back to work a few weeks after surgery. On the other hand, if you have a heavy manual job you may be off for up to 3 months. If you need to drive to work, this will affect when you can go back. Your surgeon will advise you about

DRIVE?

Once your toe has healed, about 6 weeks after surgery, you may be able to start driving again. You must be comfortable and not too stiff before trying to drive. Start by sitting in the car and trying the pedals then drive round the block. Drive short distances before long ones. Remember, if you cannot safely make an emergency stop your insurance will not cover you in the event of an accident. Ask your surgeon when it is safe for you to drive again.

PLAY SPORT?

Once your toe has healed, you can start gently exercising your foot and walking further each day. When you are comfortable doing this you can start gentle running and stretching. Contact, twisting and impact sports can follow as comfort dictates. Everyone is different in how quickly they can take up exercise again: be guided by your own body's reactions and the advice of your surgeon. Obviously, the stiffness of your toe may affect your ability to play sport, but most people can run, swim and cycle as much as they were doing beforehand within six months of surgery. Full recovery typically takes 4-6 months.

IF YOU ARE CONCERNED:

You may have moderate pain following the surgery and can take panadeine forte as provided or paracetamol. The pain should lessen each day. You should contact Dr Sterling

 $\label{eq:continuous} \mbox{(through 1300 the 478 switchboard 375 of the hospital where you had your surgery), or his secretary on . Whilst it is unlikely, if you feel extremely unwell, or there is an unexpected delay in finding Dr Sterling, attend the nearest Hospital Emergency Department.$