

HALLUX VALGUS CORRECTION

BUNION SURGERY

Introduction

Dr Greg Sterling

Surgery of the Foot and Ankle

Hallux valgus, often referred to as "a bunion", is a deformity of the big toe. The toe tilts over towards the smaller toes and a bony lump appears on the inside of the foot. Sometimes a soft fluid swelling develops over the bony lump. The bony lump is the end of the "knuckle-bone" of

the big toe (the first metatarsal bone) which becomes exposed as the toe tilts out of place.

The procedure involves a cut over the bunion. The big toe joint is opened and the bony lump is removed. The knuckle bone (first metatarsal) is cut through and re-positioned and fixed with metal screws which are buried in the bone. The soft tissues of the joint are tightened to correct the deformity and the wound stitched up.

A separate cut is made on top of the foot between the first and second toes. This allows the tissues that are pulling the big toe towards the other toes to be released. Dressings and bandages are then applied to the foot.

Generally, two different types of first metatarsal cuts can be made:

- A smaller cut further down the bone, called a 'Taylor's osteotomy'
 – this is usually for milder deformities
- A bigger cut involving the entire bone, called a 'scarf osteotomy' this is usually for larger deformities

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

The operation is usuallydone 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 will 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.

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FOLLOWING YOUR SURGERY

After the surgery - Usually dressings and a bandage will be put on your foot and you can walk on it in a protective sandal with a stiff sole straight after the surgery. You can put as much weight as comfortable through this, preferably through the heel. When one foot is operated on and once you are comfortable you are discharged from hospital on the same day. When both feet are operated on, or other surgery is performed, usually you are asked to stay in hospital for 1-2 days.



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 in Dr Sterling's rooms 12-14 days after your operation. An x-ray of your foot will be taken. The dressings will be removed and the wounds inspected. You will be shown how to exercise your toe, look after your wound, and how to splint your toe to stop it bending back against the smaller toes. You should continue heel weight-bearing for a further 4 weeks.

You will be seen again at 6 weeks after the surgery. An x-ray will be performed. If this shows that the bone is healed, you will be permitted to walk without any splint. A further appointment will be made 6 weeks later.

How soon can I....

Walk on the foot?

Normally you can walk on the foot immediately after surgery, using a stiff sandal that we will provide for you.

G o 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 days 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

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?

As you get over the operation, 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. Most people can get back to most of their previous activities within 6 months of bunion surgery. Full recovery from this surgery takes up to 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 (through the switchboard of the hospital where you had your surgery), or his secretary on 1300 478 375. 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.