

Hallux Valgus (Bunion) Correction - Minimally Invasive

INTRODUCTION

A bunion (or hallux valgus) refers to an increase in the angulation of the big toe joint (1st metatarsophalangeal joint). The cause of bunions is not fully understood, but there are a number of risk factors including family history, being female and certain types of shoes. Surgery is an effective way to relieve the pain caused by bunions in the majority of cases. Most bunion corrections undertaken by Dr Zilko are *minimally invasive (keyhole)*.

THE SURGERY

Bunion correction surgery involves a number of steps:

- General anaesthetic and IV antibiotics
- Tourniquet around the thigh
- Small incisions along the inside of the big toe
- Release of the tight lateral structures
- Re-alignment of the 1st metatarsal bone (Scarf or Chevron osteotomy), fixed with 2 screws
- Re-alignment of the 1st proximal phalanx bone (Akin osteotomy), fixed with a screw or staple
- X-rays & incision closure with steri-strips or sutures
- Local anaesthetic block, dressings & surgical shoe

GUIDELINES FOR POST-OP RECOVERY

HOSPITAL ADMISSION

- In hospital for 1 night, non-weightbearing on day of surgery

FIRST 2 WEEKS

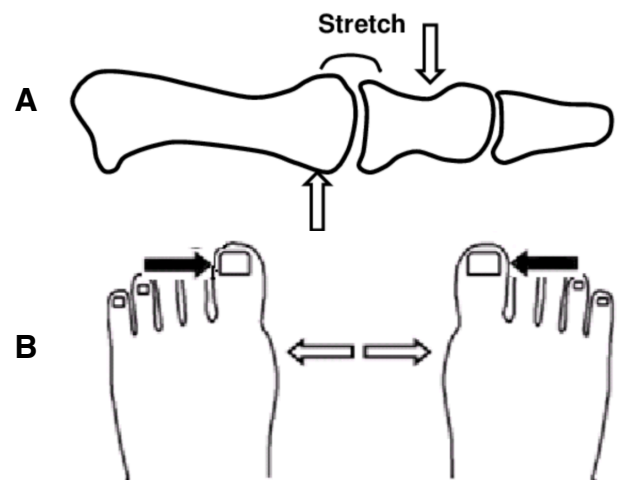
- Elevate foot and rest
- Full weightbearing as tolerated in surgical shoe
- Surgical shoe on at all times (including bed & shower)
- Crutches for balance if required
- Dressings to stay dry and intact
- Strong painkillers as required
- Vitamin C 1g per day

2 WEEK POST-OP APPOINTMENT

- Review by nurse & removal of dressings and sutures
- Fitting of Bunion Sleeve splint

WEEKS 3-8

- Transition to a stiff-soled sneaker which is straight over the inner aspect of the foot (ie the shoe should not taper and push the big toe over)
- Bunion Sleeve on during day, off at night
- Elevate foot when not walking
- Daily scar massage from 3 weeks post-op
- Exercise bike/swimming from 4-6 weeks post-op
- *Exercise 1:* Using both your hands put some pressure where the arrows indicate. It is easiest to do this with your foot crossed over the other knee. Each exercise: Push & hold for 10 seconds. Do sets of 10, 3 x per day



- *Exercise 2:* Scrunch toes on an "imaginary" towel & hold for 10 seconds. Do a set of 10, 3 x per day
- Podiatry/physio review (arrange first appointment for 2-5 days after the 2-week post-op check)
- **REHAB - PODIATRY/PHYSIOTHERAPY:**
 - Joint mobilisation, soft tissue manipulation, nerve desensitisation, foot intrinsic muscle exercises

8 WEEK POST-OP APPOINTMENT

- X-ray and review by Dr Zilko

FROM 8 WEEKS

- Avoid barefoot walking and impact exercises until 10-12 weeks post-op

6 MONTH POST-OP APPOINTMENT

- X-ray and review by Dr Zilko

Full recovery 3-6 months, can take up to 12 months.

Every patient's recovery is individual and depends on the severity of the disease and complexity of the surgery.