

MSK iCATS Foot & Ankle

Foot and ankle surgery

The foot and ankle is a highly complex structure, with 28 different bones and numerous ligaments. Foot and ankle surgery is a specialist area of practice that has developed to achieve the best results for patients.

Bunion Surgery

Bunion is the common name for a condition more accurately referred to as Hallux Valgus. Over the years, 130 different techniques have been developed for the surgical management of bunions. These provide a wide variety of options and the surgical specialist will choose with you, the most appropriate treatment to obtain the best result in terms of mobility.



What are bunions and why do they develop?

The term “bunion” refers to a swelling on the outside of the big toe joint. This swelling is the body’s way of trying to protect the area from pressure that arises from the big toe leaning too much towards the second toe. The swelling is vulnerable to rubbing from shoes, causing inflammation (redness) and pain.

About one third of the population will develop bunions at some stage with women suffering more than men. The main cause is genetic but high heeled, tight footwear can accelerate the condition.

When is surgery necessary?

For many people, bunions do not cause any pain. Surgery is only recommended if the bunion is causing pain which cannot be dealt with by changing foot wear or through treatment by a podiatrist with orthotics (insoles).

Sometimes surgery may also be a good idea if the big toe is pushing the second toe to cause a painful retracted (bent) toe.

How does the surgery correct the deformity?

Traditional bunion surgery involves making a 5cm cut on the outside of the foot to get to the structures around the toe joint and a smaller cut on the inside of the toe to release the tissues holding the toe. The procedure takes about 20 to 30 minutes. It may be performed under general or local anaesthetic.

Most bunion operations are designed to correct the deformity by realigning the metatarsal and big toe to make them straight. This involves cutting the bone(s), realigning them and fixing them in a corrected position with either screws or wires. In more severe cases for example when there is advanced arthritis, more radical joint procedures are needed. These are not used often but when they are, they involve removing a portion of the joint or surgically fusing the joint to make it stiff.

The simplest procedure simply removes painful prominence on the side of the joint. This is appropriate for some people but does not correct the deviation of the toe and has limited impact on deeper joint pain. There is also a possibility of the problem returning in time.

What might I want to discuss with the surgeon when I meet to discuss the procedure?

Is it very painful?

There will be pain and swelling which will be worse in the days immediately after surgery. The surgical team will use modern pain relieving techniques and pain killers to control this as much as possible. The amount of pain each person has varies greatly. Some people will experience very little pain.

The type of anaesthetic that will be best for you;

- ✚ A local anaesthetic allows you to remain awake and feel better afterwards, avoiding the affects of the General anaesthetic.
- ✚ A general anaesthetic will keep you asleep during the whole procedure which is often preferable.

Will I have to stay in hospital?

This depends on your general health, the support you have at home and the nature of the procedure.

Will my foot be put in a plaster cast?

This depends on the surgery performed

Are there a lot of complications?

There are always risks and complications associated with any operation and these need to be discussed in detail with your surgeon. Surgery for your bunion(s) does result in some pain and stiffness and there is a possibility that the deformity may come back again. Because of this, surgery is not recommended if the deformity is pain-free and does not restrict your walking.

In addition to the general complications which include pain and infection that can occur with foot surgery, there are risks with bunion surgery. These are:

- ✚ The toe alignment may not be perfect.
- ✚ The biomechanics of your foot will be changed by the surgery which may lead to aches and pains in other parts of your foot during the recovery period. This usually improves with time. Sometimes orthoses (insoles) may be needed.
- ✚ A small number of patients get overloading of the foot under the smaller toe-joints, this is known as transfer metatarsalgia. This may be permanent and if it is orthoses or further surgery may be recommended.

✚ The stiffness of the toe after the surgery will mean you will not be able to wear some shoes, particularly higher heeled shoes. It is worth noting that this stiffness can improve but may be permanent.

✚ The deformity may return gradually.

When will I be able to walk again and wear shoes?

In most cases you will need crutches to help you walk initially and you will be quite limited for the first 2 weeks. After that some people can get into wider shoes. Some patients need special post operative shoes. Most people are in shoes after 8 weeks. Swelling does not begin to settle until about 6-8 weeks and you should start to feel the benefits from the surgery from about 3 months. The healing process will continue for up to a year.

Can I drive after surgery?

No, not in the first few weeks. You need to be able to perform an emergency stop in comfort. People need to plan for at least a month without driving. Always check with your insurance company before driving again after surgery.

When will I be able to return to work?

This depends on the nature of the work. If you are physically inactive at work your return will be quicker. People usually go back to work between 4-8 weeks after surgery

Link to NHS direct for further information

http://www.cks.nhs.uk/patient_information_leaflet/bunion