

1st MTP Joint Cheilectomy + Shortening Metarsal Osteotomy

INTRODUCTION

The joint at the base of the big toe (1st metatarsophalangeal joint) is commonly affected by arthritis (*hallux rigidus* or *limitus*). In the early stages, bone spurs form on the top of the joint which can cause pain and stiffness. With moderate arthritis there is more significant "wear and tear" of the cartilage, and shortening the 1st metatarsal can effectively decompress the joint, resulting in improvement to pain and sometimes movement.

THE SURGERY

1st MTP joint cheilectomy & shortening of the 1st metatarsal involves a number of steps:

- General anaesthetic and IV antibiotics
- Tourniquet around the thigh
- Incision along the top of the big toe
- Protection of the big toe extensor tendon (EHL)
- Removal of abnormal bone spurs and clean-up of the joint
- Oblique bone cut of the 1st metatarsal to shorten the bone along with internal fixation screws
- Check x-ray
- Closure of incision with sutures
- Local anaesthetic block
- 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 in bed and shower)
- Crutches for balance as required
- Dressings to stay dry and intact
- Strong painkillers as required
- Vitamin C 1g per day

Copyright 2024 Dr Simon Zilko. All rights reserved.





2 WEEK POST-OP APPOINTMENT

• Review by nurse for removal of dressings & sutures

FROM 2 WEEKS

- Full weightbearing as tolerated in surgical shoe
- Shoe must be on for all walking/standing
- Elevate foot when not walking
- Daily scar massage from 3 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, 2 x per day
- *Exercise 2*: Scrunch toes on an "imaginary" towel & hold for 10 seconds. Do a set of 10, 2 x per day
- Podiatry 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
- Can transition to a supportive sneaker/sports shoe with a *carbon foot plate*. Otherwise continue in surgical shoe
- Foot intrinsic muscle exercises

6 WEEK POST-OP APPOINTMENT

• X-ray to check bone healing and review by Dr Zilko

FROM 6 WEEKS

- Transition to any normal supportive shoe
- Avoid barefoot walking
- Continue range of movement and podiatry exercises
- Avoid impact exercises until 12 weeks post-op

3 MONTH POST-OP APPOINTMENT

X-ray to check bone healing and review by Dr Zilko

Full recovery from the surgery is generally 4-6 months. Arthritis is a degenerative process and gets worse with time, and you may require further surgery in the future.

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

Dr Simon Zilko ABN 35 192 898 398 P 08 6166 3779 F 08 6316 3316 E admin@drsimonzilko.com.au www.drsimonzilko.com.au

Wexford Medical Centre Suite 64, Level 4, 3 Barry Marshall Pde, Murdoch WA 6150 Hollywood Medical Centre Suite 37, Level 1, 85 Monash Ave, Nedlands WA 6009