

1st MTP Joint Resurfacing (Cartiva)

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. As the arthritis progresses patients can develop worsening wear and tear of the cartilage in the metatarsal head. In some cases this is amenable to a resurfacing procedure with the Cartiva implant, which opens up the joint and offloads the degenerate areas. This procedure is effective at relieving pain from arthritis and delaying the need for a joint fusion.

THE SURGERY

1st MTP joint resurfacing surgery 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 bone spurs and clean-up of the joint
- Insertion of the Cartiva resurfacing implant in the 1st metatarsal head + check x-ray
- Closure of incision with sutures
- Local anaesthetic block
- Surgical shoe

GUIDELINES FOR POST-OP RECOVERY

HOSPITAL ADMISSION

- Discharge home on the day of surgery

FIRST 2 WEEKS

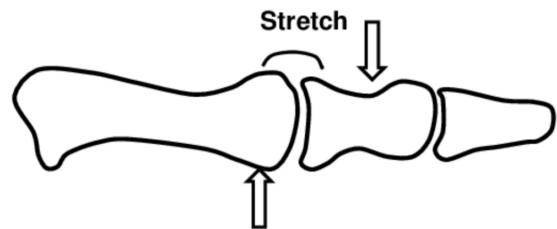
- Elevate foot and rest
- Full weightbearing as tolerated in surgical shoe
- Surgical shoe on at all times (including in bed and shower)
- Crutches for balance as required
- Dressings to stay dry and intact
- Strong painkillers as required
- Aspirin 100mg & Vitamin C 1g per day
- Antibiotics for 5 days

2 WEEK POST-OP APPOINTMENT

- Nurse review for removal of dressings and sutures

FROM 2 WEEKS

- Transition to normal stiff-soled supportive shoes
- Shoes on for any weightbearing (avoid bare feet)
- 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)
- **PODIATRY REHAB:**
 - Paraffin therapy, joint mobilisation, cold laser, soft tissue manipulation and nerve desensitisation
 - Foot intrinsic muscle exercises

6 WEEK POST-OP APPOINTMENT

- X-ray and review by Dr Zilko

FROM 6 WEEKS

- Continue range of movement and podiatry exercises
- Avoid impact exercises until 10-12 weeks post-op

3 MONTH POST-OP APPOINTMENT

- X-ray and review by Dr Zilko

Full recovery from the surgery is generally 3-6 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.

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