

Toe Correction

INTRODUCTION

Toes become mal-aligned or painful for a number of reasons. In the majority of cases, toe deformities result from imbalance between the muscles that move the small joints of the toes. Often this results in joints that are flexed, resulting in painful callosities. Pain under the balls of the toes can also occur due to overload.

THE SURGERY

Toe correction surgery can include a number of steps:

- General anaesthetic and IV antibiotics
- Tourniquet around the thigh
- Lengthening or release of tight tendons on the top or bottom of the toe
- Releasing or stabilising the joint at the base of the toe (metatarsophalangeal joint)
- Fusing one or more of the small joints of the toe (interphalangeal joints)
- Internal fixation of the toe with screws or wires
- Shortening the metatarsal bone (Weil osteotomy) if required and fixation with a screw
- Repair of the stabilising tissue under the MTP joint if required (plantar plate reconstruction)
- Check x-ray and closure of incision with sutures
- Local anaesthetic block
- Surgical shoe

GUIDELINES FOR POST-OP RECOVERY

HOSPITAL ADMISSION

- Most patients go home on the day of surgery

FIRST 2 WEEKS

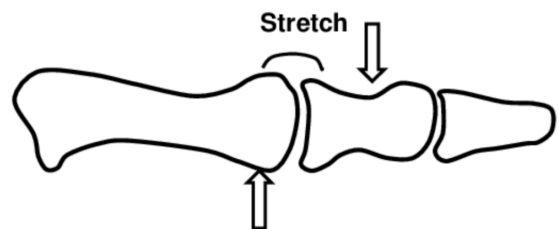
- Elevate foot and rest
- Full weightbearing as tolerated in surgical shoe (put weight through heel, not through toes)
- Surgical shoe on at all times (including in bed and shower)
- Crutches for balance if required
- Dressings to stay dry and intact
- Strong painkillers as required
- Antibiotics if prescribed

2 WEEK POST-OP APPOINTMENT

- Review by nurse & removal of dressings and sutures
- Fitting of Budin splint if required

WEEKS 3-6

- Full weightbearing as tolerated in surgical shoe
- Surgical shoe on for any weightbearing
- Can sleep out of shoe and Budin splint if no wires (if wires used, **must** sleep in shoe for protection)
- Elevate foot when not walking
- Daily scar massage from 3 weeks post-op
- Commence exercises as follows:
- *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: Foot & Ankle Rehabilitation Centre**
 - Paraffin therapy, joint mobilisation, cold laser, soft tissue manipulation and nerve desensitisation

6 WEEK POST-OP APPOINTMENT

- X-ray and review by Dr Zilko, removal of any wires

FROM 6 WEEKS

- Transition to normal stiff-soled supportive shoes
- Avoid barefoot walking and impact exercises until 12 weeks post-op

3 MONTH POST-OP APPOINTMENT

- X-ray and review by Dr Zilko

Full recovery is usually 3-4 months.

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