FOREFOOT RECONSTRUCTION

INTRODUCTION

Rheumatoid (and other arthritis) often results in deformities of the forefeet. In most cases there is a large bunion (hallux valgus deformity) of the joint at the base of the 1st toe with advanced degenerative changes of the joint cartilage. The 2nd to 5th toes are frequently malaligned, resulting in painful callousities over the joints of these toes and pain at their bases. A forefoot reconstruction aims to improve the alignment of the forefoot and significantly decrease pain.

THE SURGERY

Forefoot reconstruction surgery involves a number of steps. These include:

i. General anaesthetic, intravenous antibiotics.
ii. Incision along the inside of the big toe.
iii. Fusion of the joint at the base of the big toe.
iv. Two incisions on the top of the foot.
v. Removal of bone at bases of 2nd to 5th toes.
vi. Straightening of 2nd to 5th toes.
vii. Insertion of wires into toes.
viii. Check x-ray.
ix. Closure of wound with stitches/sutures.
ix. Infiltration with local anaesthetic and insertion of Painbuster (local anaesthetist infusion pump).

RISKS OF SURGERY

All surgical procedures carry some risk. The risk of complications of forefoot surgery is low. Some of the risks with surgery include:

• Infection
• Problems with wound healing
• Nerve injury causing numbness, tingling and/or pins and needles.
• Scarring
• Non-union of joint at base of big toe (the bones don’t fuse together)
• Deep venous thrombosis/pulmonary embolism (the risk of DVT increases with smoking, the oral contraceptive pill and hormone replacement therapy, immobility and obesity).
• Anaesthetic complication
• Drug allergy
• Ongoing pain

GUIDELINES FOR EXPECTED POST OPERATIVE RECOVERY

Keep dressings dry and intact until post operative appointment. Keep foot elevated as much as possible, especially for initial 72 hours.

Removal of stitches/sutures: 10-14 days at first post operative appointment.

Pain killers may be required for up to 2 weeks. Antibiotics for up to 2 weeks

Protected weight bearing for 6 weeks on crutches, wedged post operative shoe to promote heel weight bearing.

Recommencement of most activities: 12 weeks. Full recovery: 9-12 months.

Every patient’s recovery is individual and depends on the severity of the injury and the complexity of the surgery.

ANY PROBLEMS

During office hours contact Dr Wines’ office on (02) 9409 0500.

After hours please contact the hospital where your surgery was performed.