

DR ANDREW WINES MBBS FRACS (Orth)
Adult and Paediatric Orthopaedic Surgeon
Foot, Ankle and Trauma Surgery

TOE CORRECTION

INTRODUCTION

Toes become malaligned 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.

THE SURGERY

Toe correction surgery has a number of steps. These include:

- i. Lengthening the tendons on the top and/or bottom of the toe
- ii. Releasing and stabilising the joint at the base of the toe (metatarsophalangeal joint)
- iii. Fusing (stiffening) one or more of the small joints of the toe (interphalangeal joints)
- iv. Toes are often held in place with a wire that remains in the toe for six weeks

RISKS OF SURGERY

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

- Infection
- Problems with wound healing
- Nerve injury causing numbness, tingling and/or pins and needles.
- Non-union (the joints don't fuse together)
- Residual malalignment
- Ongoing pain
- Injury to blood vessels that supply the toe
- Movement of the wires either out of or into the toe

GUIDELINES FOR EXPECTED POST OPERATIVE RECOVERY

Pain killers may be required for up to 2 weeks.

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 post operative appointment.

Weight bearing as tolerated in post operative shoe.

Removal of wire: 6 weeks.

Resumption of most activities: 6-12 weeks

Full recovery: 12 weeks.

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.