

# HALLUX VALGUS SURGERY: LAPIDUS TYPE BUNIONECTOMY

## Postoperative Recovery Protocol

|                             |   |
|-----------------------------|---|
| <b>Type of Procedure:</b>   | Outpatient  |
| <b>Length of Procedure:</b> | 1 hour  |
| <b>Anesthesia:</b>          | Twilight (local anesthetic with intravenous sedation) |

### **Hallux valgus and bunions: what is it?**

The big toe of the foot is called the hallux. If the big toe starts to deviate inward in the direction of the baby toe the condition is called hallux valgus. As the big toe drifts over into valgus, a bump starts to develop on the inside of the big toe over the metatarsal bone. This bone prominence on the inner edge for the metatarsal is referred to as a bunion.

Bunions are commonly hereditary but may also be caused or aggravated by shoe wear. The condition is far more common in women than in men, and rarely occurs in individuals who do not wear shoes. Once a bunion is present the deformity of hallux valgus worsens slowly over time.

The treatment of a bunion depends entirely on how uncomfortable it is. Since the pain from a bunion is always aggravated by shoe wear, the symptoms will often depend on the type and size of shoes worn. The perception of pain or discomfort however is very varied, since there are some individuals who have a small bunion, but which is very uncomfortable, since this limits their ability to wear shoes comfortably. On the other hand, some individuals may have quite significant deformities which they find is an annoyance, but does not limit their activities in anyway.

Realistically, there are only two ways to treat a bunion; either change the size and shape of the shoe, or the size and shape of the foot. Due to the styles of shoes, it is obviously much easier to change the size and shape of the shoe in the male than the female.

Once a bunion gets to be irritating or painful, and shoe wear is uncomfortable, surgery may be recommended. There are many different surgical procedures that can be performed and the decision to perform one type of surgery or another is based upon the extent and magnitude of the bunion deformity, the presence of arthritis in the big toe joint, and the space between the first and second metatarsals, which is called the intermetatarsal angle.

### **The Lapidus bunionectomy: what is it?**

This is a bunion operation specifically designed to control movement of a small joint in the foot. In addition to straightening the big toe and removing the bunion, a small joint in the middle of the foot (the 1<sup>st</sup> tarsometatarsal joint) will be glued or fused together. The reason for performing this type of surgery is to eliminate arthritis, or control excessive movement which we call hypermobility. By stabilizing this joint, the likelihood of recurrent bunion deformity is lessened. The joint is fixed with two screws which typically stay in forever.

### **General recovery facts**

- You can expect moderate pain for a few days
- You are not allowed to walk on the foot after surgery



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- You should plan to use crutches or a walker if you need support
- You may drive by about 4 days if it is your left foot, and 2 weeks if your right foot
- The foot will be immobilized in a boot or a cast for about 6 weeks
- You will not be able to get the foot wet while the foot is bandaged
- When you go into the surgical shoe at about 6 weeks, do not walk barefoot
- An orthotic arch support is important for your recovery. The orthotic support will be made in our office following a computer analysis of the pressure of the foot.
- You should wear a stiff soled shoe for one to two months
- The foot will remain puffy and swollen for 4-6 months
- Certain shoes cannot be worn while the front of the foot is swollen

### Specific Post-Operative Course:

#### Day 1

1. Foot wrapped in bulky bandage and surgical shoe
2. Ice, elevate, take pain medication
3. Expect numbness in foot 12-24 hours then moderate pain
4. Bloody drainage through bandage expected
5. Do not change bandage.

#### Day 3

1. Do not walk on the foot at all. Moderate pain – continue pain medication,
2. ice, elevate the foot as much as possible

#### Day 7-14

1. First follow-up in the office, X-rays taken
2. Dressing changed- bunion bandaging done, and a boot is applied to the foot
3. You may begin partial walking on the foot only

#### 6 weeks

1. X-ray taken, if bone healing, full walking permitted.
2. Walking will be in a boot or a surgical shoe for 2 weeks.
3. Do not attempt to walk at this time without the shoe
4. Physical therapy is necessary for about 1 month.

