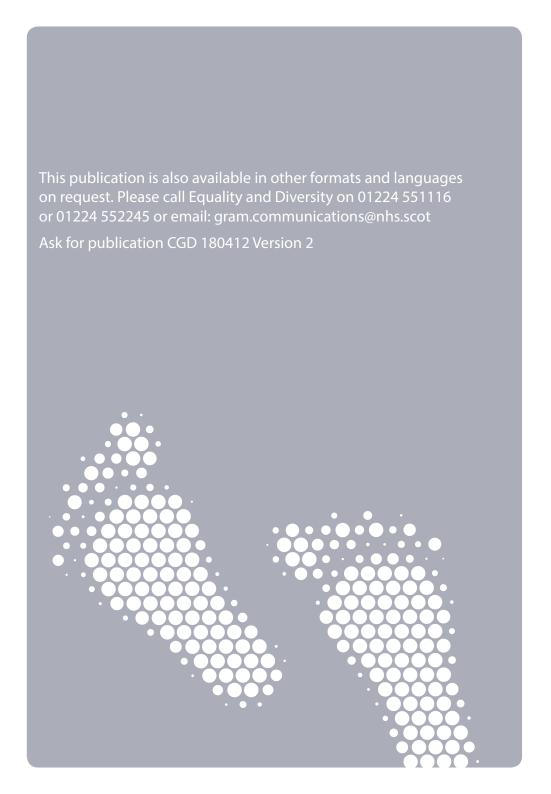


# Hallux Valgus (Bunion)

How you should be involved in decisions about your healthcare and treatment.







#### Who is this leaflet for?

This leaflet is for patients requiring information on how to manage their bunion (medical term, Hallux Valgus).

#### What is this leaflet about?

This leaflet will provide you with the required information to help you decide whether you can self manage your bunion or whether you require a surgical opinion. This leaflet will also provide you with the pre and post surgery care, the possible procedures and make you aware of any complications which may arise.

## What is Hallux Valgus?

This is a common toe deformity affecting the big toe joint, also known as a bunion. Often, the big toe is angled towards the second toe, pushing the second toe out of place. There are a number of reasons bunions can develop, these can include the shape of the foot, medical conditions such as arthritis or can be hereditary.

## What are the symptoms?

Some people have no problems with a bunion at all other than perhaps thinking they look "unsightly". When bunions are a problem it is usually due to pain around the big toe and/or footwear problems. On occasion, the foot becomes so wide, making it difficult to find comfortable footwear. In some cases there is thickening of the surrounding skin and tissue next to the affected joint, resulting in inflammation, pain and blisters.



## How can my foot problem be treated?

There are 2 treatment options in managing your bunion, these are:

- Non surgical management.
- Surgical management.

## Non surgical management

Suitable footwear is often all that is needed to help accommodate and manage the shape of a bunion. Wearing suitable footwear will not cure the deformity, but ease symptoms of pain and discomfort. Please see separate leaflet for advice on suitable footwear. Some patients may benefit from other therapies, these may include:

- Anti-inflammatories e.g. Ibuprofen (if these are suitable for you) and pain relief e.g. paracetamol may help. If the bunion has developed as a result of a general medical condition, then other medication may be advised.
- Padding and strapping of joint: Padding, supports, insoles and toe separators may help make your foot and toe more comfortable and prevent footwear rubbing. These can be very helpful, although they will not physically straighten your toe.
- Footwear advice: Changing to wider footwear to accommodate the width and depth of your foot can also improve symptoms.
- Management of soft tissue conditions e.g. blisters.

# Surgical management

If non surgical options do not help the symptoms, surgical treatment may be an option.

## Why should I consider surgery?

You may require surgery to reduce pain and improve function. Surgery will not be offered to improve the appearance of your foot. The recovery for surgery to the big toe can be long and frustrating. However if you feel your toe is problematic enough, surgery may be an option for you.

## What type of surgery is available?

The aim of bunion surgery is to straighten the big toe and relieve the discomfort. There are several procedures for bunion surgery and the best surgery depends on the size of the bunion and whether there is any arthritis or instability in the foot

Osteotomy: For most people the surgery is where the bones of your toe are cut and reset to straighten your big toe. You will be able to bend your toe after the surgery.

Athrodesis: If the big toe joint has significant arthritis, we may recommend surgery to fuse the toe joint together. This will still straighten the toe however it will additionally involve knitting the bones of the big toe together making the joint permanently stiff.

During these surgeries the bones are held in their new straightened position with small screws and/or staples. You will not see the metal work unless you have an x-ray. We do not usually remove the metal work although if it causes any problems we can remove it at a later date.

#### Is there any preparation needed before the procedure?

Prior to the surgery, you will meet with the surgeon to assess your foot condition and discuss with you the type of surgery which would be best to treat your bunion.





## What are the potential benefits of and risks of surgery?

As with any surgery, there are always a few potential risks. These may include local infection, which means the wound may take longer to heal; non or malunion of bones, which means the bone does not heal or heals in a position which may need further surgery; long term stiffness or swelling of the joint and surrounding area; nerve damage, resulting in painful scarring and nerve pain.

## Are there any safer or alternative treatment options?

Only you know how much the pain and problems caused by your big toe affects you. Therefore only you can decide if non-surgical or surgical management will help your foot condition. If you feel you do not want surgery, other options include self management which are detailed within this leaflet.

# What happens during the procedure?

Most of these surgeries are day case procedures where you would come in and go home on the same day. If you have any underlying medical conditions we may need to admit you to hospital overnight. The anaesthetist will meet you before your surgery and discuss the best anaesthetic for you.

Most patients have local anaesthetic nerve blocks to numb the foot along with sedation or a general anaesthetic. However the final choice will be made following discussion between you and the anaesthetist about what would be best for you.





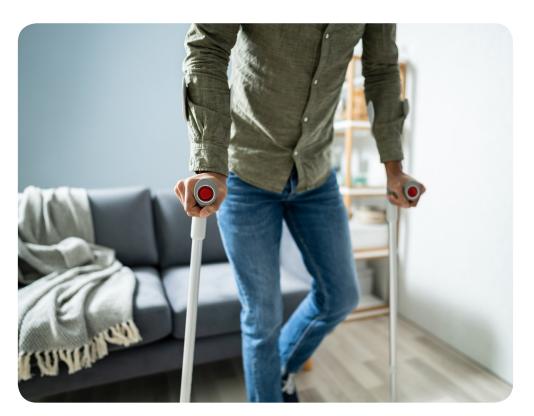


## What happens after the procedure?

Following the procedure, your foot and ankle will be bandaged and will you will be provided with a special sandal and crutches. Please ensure your bandage is kept dry. A follow-up appointment in approximately 10-14 days will be made to change your dressing.

#### Will I be able to undertake normal activities?

During your recovery period, you will need to limit your normal daily activity e.g. walking. Driving will be restricted to several weeks post surgery. The nature of your work will determine how much time you require off to recuperate. You are best to be on your feet for very short periods at a time rather than a single longer period.



## How long will it take to heal?

6-8 weeks following your procedure, you will be reviewed by the Orthopaedic team. You may have an x-ray at this stage and you should be able to start to increase your weight bearing. If your swelling is improving you will be able to start to wear your own foot wear again.

It is normal for you to have some swelling and this may last for several months but should gradually settle. Your toe may be stiff to start with however this normally improves with time and exercise. It may take 3-6 months for you to be back to your normal level of activity e.g. work standing all day. However every person is different.





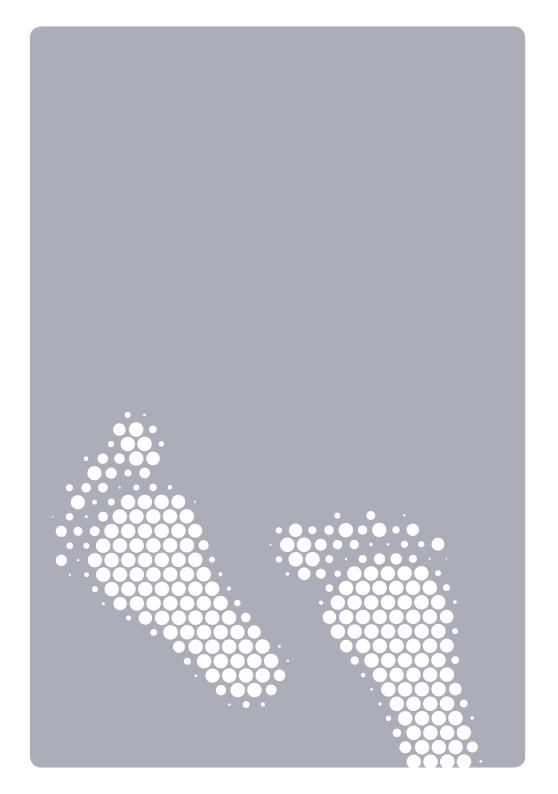


4. Further Information:			

**Useful Information for patients:** 

- NHS 24 Phone: 111
- rcpod.org.uk
- www.nhsinform.scot
- www.nhs.uk







# For further information and advice please contact:

For Aberdeen City:

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