

Cheilectomy

Your guide to a successful outcome following surgery



Orthopaedic Department

What is Cheilectomy?

This is surgery performed for a condition known as Hallux-Rigidus wear-and-tear arthritis in the big toe joint. It involves removing the bony spurs from around the joint.

- The surgery is performed under general or regional anaesthesia. A local anaesthetic is injected around the ankle for additional pain relief and can last up to 18 hours.
- Any alternative treatments if appropriate, will have already been discussed with you prior to this operation.

Will I be able to walk?

- When you return from theatre you will have a dressing and bandage around your big toe, foot and ankle.
- You can put **as much weight on the foot as you can tolerate** with the aid of crutches and a protective shoe but you should expect some throbbing and/or discomfort for the first few days.
- You should **walk with the foot flat** on the floor and take short steps putting most of the **weight through your heel**.
- Resist the temptation to lift the toes up into the air - let them relax onto the ground.



What is the best way to climb stairs?

- When climbing stairs use the aid of a bannister if possible. Hold onto the bannister with one hand and have the crutch in the other hand.

- Climb the stairs using the good leg first then the operated leg (ensuring the whole foot is flat on the step) and then the crutch.
- On descending the stairs the order is the reverse: crutch- operated leg- good leg.

What about pain relief?

Local anaesthetic nerve blocks are used to minimise the pain after surgery. During your operation injections are used to temporarily stop the small nerves that supply the feeling to your foot and ankle, from working. The process wears off 6-18 hours after your operation. When you wake up your foot may also feel numb but essentially pain free.

It is important to start taking the pain relieving tablets you have been prescribed immediately after the operation. By starting the pain relieving tablets before the local anaesthetic nerve block has worn off discomfort is kept to a minimum. The vast majority of patients feel very little in the way of pain by doing this. About 48 hours after the operation we advise that you halve the dose of your painkillers and then discontinue them altogether according to symptoms at the time.

If any particular painkillers do not suit you, please let the surgeon and anaesthetist know on the day of surgery.

Will my foot be swollen after surgery?

- The foot will swell after surgery; the amount is quite variable.
- It varies in how quickly the swelling disappears after the operation and 6-9 months of intermittent swelling is not unusual, especially toward the end of the day.

Elevation

- You should elevate your foot most of the time for the first week or so after surgery.
- The leg needs to be elevated above the level of the heart for elevation to be most effective.
- Before you come into hospital it is recommended that you prepare by elevating the end of your bed on blocks or elevate the mattress

by putting some firm blankets/ cushions underneath. This will aid decrease of swelling.

Contrast bathing and ice pack

- Once the bandages have been reduced to a small dressing you can start to ice the foot. Apply a bag of frozen peas (wrapped in a damp cloth) on the top of your foot for 15 minutes. Repeat several times a day. You can reuse the peas as an ice pack but do not eat them.
- After the incision has healed and is dry you can help to reduce the swelling by contrast bathing. Place your foot in a bucket/bowl of ice cold water and then a bucket / bowl of warm water for 30 seconds each. Repeat several times (approximately 6 times). Always finish with cold water.

Clinic appointments

You will be given/sent an outpatient appointment for approximately **2 weeks** after the operation.

- At this appointment your bandage will be removed, wound inspected and the stitches or steristrips removed.
- You will be able to stop 'flat foot walking' and try to start walking normally. This is sometimes not a quick process and you may find that it takes a few weeks to be walking well. You should be guided by how much discomfort you experience when walking. Try to walk as normally as possible by putting the heel down first and then pushing off the toes.
- You will be able to wear normal shoes on the operated foot. However you may find it uncomfortable and may need to wear sandals with supportive straps in the meantime.
- You only need to use the crutches if your foot remains painful but are safe to walk without the crutches if you feel confident.
- You can also use one crutch in the opposite hand to the side of the operation if this is more comfortable
- It remains a good idea to keep the foot elevated occasionally over the next few weeks. The swelling is always the last thing to recover.

You will have a further clinic appointment at approximately **6 weeks** after surgery when you will be reviewed.

When can I go back to work?

- Depending on your occupation you could be off work for 2 weeks or more. Please discuss this with your Doctor.

What about driving?

- You must not drive for 2 weeks (unless you have an automatic car and left foot surgery).
- It may take some time to drive comfortably after the initial 2 week period as pressure on the big toe may continue to be uncomfortable. You must be walking comfortably before you start driving.

What are the risks and complications?

Luckily these are rare with this surgical procedure

- **Infection** – small stitch redness occurs, serious infection is rare.
- **Swelling** – as previously discussed in the patient information is a certainty.
- **Blood clots** – very rare, but if you have redness, swelling, pain and firmness in your leg please contact the hospital or attend A&E
- **Scar** – some numbness is normal.
- **Persistence of symptoms or failure to relieve symptoms** – cheilectomy does not cure the arthritis. 10 - 15% of people still have too much discomfort or stiffness to regard it as a success. If so, your surgeon will explain what else can be done.

What exercises should I do after the surgery?

Exercises after surgery are essential to maximise the chances of success. It is vital that you understand and perform these exercises in order to reduce stiffness of the joint. Neither a surgeon nor a physiotherapist can do the exercises for you, and this part of your

recovery is very much in your hands. It is not possible to cause damage with these exercises, and initially the stretch will be uncomfortable, but you must persist for the best results.

In the first 2 weeks

- You must move your foot and ankle as much as possible at least 30 times an hour. You may feel a stretch in your calf and/or front part of the foot whilst doing this.
- You must also wiggle the toes as much as you are able although this will be difficult due to the size of the dressing (you will not be damaging the toes by doing this)

Exercises to begin at 2 weeks after the operation and continue for at least 6 weeks after operation

Do these exercises 3-4 times a day.

1. Gently massage around the scar as much as able. The scar may be sensitive and more painful in areas. It is important to continue to desensitise the scar and prevent adhesions (tissues sticking together) forming. Try to do this for a few minutes at least twice a day.
2. With your foot flat on the floor and some tissues on the floor. Try to pick up a tissue from the floor by scrunching up all your toes therefore increasing the arch on the inside of the foot. Repeat 10 times.
3. Sit in a chair, push the toe flat into the floor. Repeat 10 times.
4. Hold the base of the big toe with your fingers and move the whole toe 'passively' downwards and upwards with your other hand. Repeat with the 2nd and 3rd toes. Repeat 10 times on each toe.



5. In a sitting position put the weight on the front part of the foot, bending the big toe at the joint. Progress this to a standing position once comfortable. Repeat 20 times.



6. Sitting with your legs straight out in front of you. Pull the foot and ankle up towards the shin feeling a stretch down the back of the calf. Hold for 15 seconds. Repeat 3 times.
7. Standing one foot in front of the other with your hands against a wall. Bend the front knee keeping your foot straight and heel on the ground, lean towards the wall putting the weight on the front leg. You should feel a stretch in the calf of the back leg. Keep the back knee straight. Hold for 20 seconds. Repeat 3 times.

These exercises should be continued for a minimum of 6 weeks after your 2 week review.

You are unlikely to require Physiotherapy but will be referred by a Doctor/Healthcare professional if this is felt to be required.

Key reference sources/useful websites

- www.feetforlife.org
- www.footandankleclinic.co.uk
- www.bofas.org.uk
- www.bone-surgeon.co.uk

For further Information or Advice

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|--------------------------------|--------------|
| ■ Physiotherapy Department | 01483 464153 |
| ■ Surgical Short Stay Unit | 01483 406828 |
| ■ Day Surgery Unit | 01483 406783 |
| ■ Orthopaedics/Fracture Clinic | 01483 464158 |

Contact details

Orthopaedic Physiotherapy Team

Telephone: 01483-464153

Physiotherapy Department

Royal Surrey County Hospital

Egerton Road

Guildford. Surrey

GU2 7XX

Royal Surrey County Hospital (RSCH) NHS Foundation Trust fully subscribes to the National Patient Safety Agency (NPSA) *Being Open* best practice framework, November 2010.

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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Author: Gosia Wikarczuk & Iwona Kolodziejczyk

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