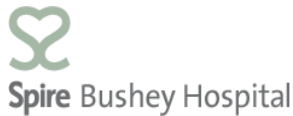


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Minimally Invasive Cheilectomy Operation - Post Operative Rehabilitation Protocol (Big Toe Joint - Bone Excision for Arthritis)

Operative Summary

The excessive bone (osteophytes) on the top of your big toe joint, are removed with a small burr. The excessive bone has the appearance of a lip (Greek=cheilo). The joint will be evaluated and tight structures released, as well as other osteophytes removed. Cartilage stimulating procedures may also be performed. The operation is performed under an ankle anaesthetic block, numbing the entire foot. A general anaesthetic or sedation may also be used, according to your preference.

Day of Operation (Day 0)

Strict elevation

Rigid post-operative sandal - mobilise full weight bearing (with 2 crutches only if needed)

Home the same day

Some bleeding may to be seen through bandage, this is normal

Move toes, ankle, knee and hip

Regular (3-4 times/day) pain relief (Codeine and Diclofenac) once discomfort begins (as the ankle anaesthetic block wears off, approximately 6-12 hours after surgery)

Day 1 - 7 Post Operatively

Strict elevation at the level of the chest, for 23 hours a day (for pain relief, swelling and wound healing)

Regular (3-4 times/day) pain relief (Codeine and Diclofenac)

Full weight bearing in post-operative sandal (can be removed at night, but put back on when walking)

Sleep with leg on 2 pillows

Keep bandage on and keep dry until Day 4

Ice for 10 minutes every hour, on top of bandage

Move toes, ankle, knee and hip and perform straight leg raises (lift leg up with knee straight)

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Day 3 Post Operatively – Bandage Removal + Showering

You should remove the bandage yourself. Underneath will be gauze, remove this too. The gauze and dressing may be blood stained – this is normal.

Wrap the foot in cling film for added waterproof protection. You can now have a light shower, but not a bath.

Day 3 Post Operatively – Normal Shoe and Start Rehabilitation Exercises

You can now try and wear a normal shoe if you feel comfortable enough

It will need to be a generous fit ie a lace up shoe

If you cannot get into a normal shoe, continue to wear the post-operative sandal

Continue full weight bearing

Start Rehabilitation Exercises (see below, 5 times / day) – this is in order to preserve as much movement gained during the operation as possible

Elevation at the level of the chest, for 12 hours a day

Week 3 Post Operatively (after 2 weeks completed)

Clinic review by Mr Gordon - Dressing removed, wound inspected, stitches removed

Continue elevation at the level of the heart when not walking, especially at the end of the day

Post-operative sandal can be removed (if not already) and normal shoe worn, or as soon as you are comfortable to do so.

Continue rehabilitation exercises

Week 6

Outpatient visit - Pain, swelling and movement assessed

Continue rehabilitation exercises

Month 3-6

Outpatient visit as required - Pain, swelling and movement assessed.

Shoe fitted reviewed

Continue rehabilitation exercises

Rehabilitation Exercises – Day 3 Post Operatively (5 times / day)

Big Toe Joint Exercises : Aim – To restore big toe joint movements

1. Seated heel raises x 20: Sit with foot flat on floor, knees bent 90° keeping toes on floor, raise heel to the limit of pain and return. Bend your knee more than 90° if you feel comfortable to do so, this will bend the toe more.
2. Toe lifts x 20: Sit with foot flat on floor, raise toe as far as possible to ceiling and return
3. Toe bends x 20: Sit with toes resting over the edge of a phone book, bend toes towards the floor
4. Toe pulls x 20: Pull toe up with hand to pain and hold for 3 seconds, relax
5. Toe pushes x 20: Push toe down with hand to pain and hold for 3 seconds, relax

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Rehabilitation Exercises - After 1 week Post Operatively (or sooner if you are able) (5 times / day)

6. Standing both heel raises x 20: Stand close to a wall for balance, raise heels to the limit of toe pain and hold for 3 seconds
7. Standing single heel raises x 20: Stand close to a wall for balance, stand on one leg, raise heel to the limit of toe pain and hold for 3 seconds
8. Continue exercise 3, 4 and 5

Ankle and Calf Exercises : Aim – To maintain muscle tone, strength and mobility

Ankle and Calf: ankle plantar flexion (tip toe position) and dorsiflexion (bring foot up), strengthening of the peroneal muscles (bring foot out to the side)

Gait training: Optimise load distribution for the whole foot focusing on weight bearing of the first MTP (big toe) joint and hallux (big toe)

Returning to Work

Sedentary jobs: Return after 1 week, if able to maintain foot elevated at level of waist

Standing/walking jobs: Return after 2-4 weeks, but may be sooner depending on comfort and swelling

Manual/labouring jobs: Return after 4-6 weeks, but may be sooner depending on comfort and swelling

Driving

You need to be able to control the vehicle in an emergency. Can you stamp your foot down on the ground? For left sided surgery and no clutch is required, driving is probably safe after 3 days post operatively. For right sided surgery, driving is probably safe at 1 - 2 weeks post operatively, once in a normal shoe. If you are unsure, please ask Mr Gordon.

References

Postoperative Rehabilitation after Hallux Valgus Surgery: A literature review, Polastri, The Foot and Ankle Online Journal 4 (6): 4 2011

Rehabilitation After Hallux Valgus Surgery: Bearing of the First Ray During the Stance Phase Importance of Physical Therapy to Restore Weight, Schuh et al, PHYS THER. 2009; 89:934-945