#### **CLAW TOE CORRECTION**

# What is the problem?

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.

#### What's involved?

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

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

## What's the worst thing(s) that can happen with 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
- Toe ischemia leading to amputation

### What can I expect after surgery?

#### Rest

- You will have a shoe on your foot. Keep foot elevated as much as possible, especially for initial 72 hours. Keep dressings dry and intact until post operative appointment.
- Moblise short distances as pain allows, aim to remain in your own home for the first few weeks limiting long periods of standing or mobilising
- Bear weight as tolerated in post surgical shoes

#### Pain

- Pain relief may be required for up to 4 weeks; depending on your other medications this may include:
  - Regular paracetamol, anti-inflammatory drugs and break through opiate type medications

#### Driving

- Any surgery performed on the right foot or both feet will mean no driving for a minimum of 6 weeks
- If surgery was performed on the left foot then driving in an automatic is possible, but Dr Phegan would recommend waiting a minimum of two weeks before attempting to drive

# Driving any vehicle with a cast or boot is potentially hazardous and you should consider this before getting behind the wheel

#### Follow up

- Keep all dressings dry and in tact for the first two weeks
- Removal of stitches/sutures typically occurs at an appointment with Dr Phegan and his in-house therapists at 10-14 days at first post operative appointment. Very occasionally some sutures need to stay in for longer
- Your appointment will be booked by Dr Phegan and a confirmatory SMS will be sent informing you of the time and date for follow up

#### Typical milestones

- 2 weeks: Wound review and removal of sutures, commence rehabilitation
- 2-6 weeks: regular physiotherapy to increase range and weight bearing
- 6weeks: Removal of toe pins in clinic setting. Ensure you have taken some pain relief at least 20 minutes prior to your appointment.
- 6weeks to 3 months: work on swelling reduction, scar massage and mobility
- Full recovery 6 months

# 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 Phegan's office on (07) 56711120 or email info@drphegan.com

After hours please contact the hospital where your surgery was performed or attend your local GP