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Adult and Paediatric Orthopaedic Surgeon Specialising in the Foot and Ankle

Lesser Toe Correction

INTRODUCTION

Lesser toes become mal-aligned for a number of reasons including wear and tear, and an adjacent bunion pushing on these toes, but in the majority of cases, lesser toe deformities result from an imbalance between the muscles that move the small joints of the toes and the longer muscles that start up at the leg. This manifests as joints that are flexed or "clawed", resulting in painful callosities, caused by rubbing of skin on the upper of the shoe or the ground.

THE PROCEDURE

Toe correction surgery has a number of steps including:

1. Lengthening of tendons on the top and/or bottom of the toe

2. Releasing, re-balancing, and stabilising the joint at the base of the toe (metatarsophalangeal joint)

3. Arthrodesis (fusion) of one of the small joints of the toe (interphalangeal joints)

4. Insertion of a wire down the middle of the toe that remains in the toe, and is removed in the clinic 4 weeks later

5. Check Xray with intraop Xray machine

RISKS & COMPLICATIONS

Every surgical procedure carries some risk. These risks are largely uncommon and many are rare.

They include: Anaesthetic complications Drug reactions Wound infection Deep Vein Thrombosis (DVT)/Pulmonary embolism (PE) Sensory nerve injury Non-union Damage to blood supply of toe Movement of the wire into or out of the toe Stiffness



POST OPERATIVE PROTOCOL

This is a day surgery case and you are able to weightbear immediately Keep foot elevated as much as possible for the first 72 hrs Dressings debulked after 72 hrs Keep wounds dry for first week, then may get wet in shower Pain killers required for up to 2 weeks First post-op appointment roughly 2 weeks post surgery for wound check Wire removed at 4 weeks Full recovery 12 weeks

PROBLEMS AND CONCERNS

If you have any queries or concerns, contact Dr. Ling's rooms on 9650 4782 between business hours. After hours or on weekends, if your matter is urgent, please present to the Emergency Department at Prince of Wales Hospital if you are an adult, or Sydney Children's Hospital if the patient is your child, and you will be seen by the Orthopaedic Registrar on call, who will contact Dr Ling directly