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1st MTP Joint Fusion Postoperative Information Sheet

Recommended Appliances for after your surgery:

- Forearm crutches, walking frame or knee scooter. Whichever you are most comfortable using you will need to bring with you to hospital on the day of surgery.
- Evenup (to be worn on your non-surgical foot to reduce leg length discrepancy)
- Ice Bag
- Shower stool
- Shower sleeve seal (to keep foot dry during showering)
- Bed cradle
- Extra pillows for raising your foot/leg up when sitting or lying down.

What is a 1st MTP joint fusion?

An MTP joint fusion is an operation to join (fuse) the joint of the big toe. Arthritis of the 1st MTP joint can cause pain and swelling. It develops when the cartilage in the joint is worn away and the two bones that make up the big toe joint rub against one another. Fusion of the joint is the most reliable method of relieving pain and improving function.

Are there any risks?

Complications during and following this procedure are unusual. However, they can include:

Haematoma: A build up of blood within the operated area, which can be painful and may require surgical drainage.

Deep vein thrombosis (DVT): The development of blood clots in the legs carries a very low risk. Certain types of oral contraceptive ("the pill") may increase this risk and may need to be stopped before your surgery. If after your surgery you notice a tight, painful, red, warm area in your calf, see your GP as soon as possible or attend an emergency department. Please also inform Mr. Winters' rooms.

Infection: Signs and symptoms of an infection of the joint or wound sites include:

- Spreading redness

- Increased pain causing difficulty mobilising

- Increased swelling

- Oozing and/or odour from the wound

- Increased heat to touch

If your wound becomes red, swollen or very tender, or develops a discharge, please contact your GP and also advise Mr. Winters' rooms.

Nerve damage: Damage to the skin nerves over and around the wound site can occur, leading to small areas of numbness.

What happens after surgery?

The wounds are closed with dissolving stitches and covered in plasters. The foot is then covered with a thick bandage. **The bandage must not be removed before your first postop appointment. The bandages must not get wet.**

Before you leave the hospital, you will receive a prescription for pain relief. If you know of a specific drug that you do not tolerate well, please let our staff know as soon as possible so that you may be prescribed an alternative. You should continue to take this pain relief medication as directed when the local anaesthetic wears off and then as necessary.

Will I be able to walk on my foot straight away?

It is expected that you will be able to weight bear after your surgery. Crutches or a walking frame are advised. You will have a forefoot offloading postoperative shoe that needs to be worn at all times when walking or standing for 6 weeks. For the first 2 weeks you must also wear it when in bed. A bed cradle is recommended to allow your foot some space while you sleep.

Will the foot be swollen?

Some swelling is to be expected for the first few weeks; this is temporary. The best results are obtained if the foot is elevated higher than the heart. Keep in this position for at least 15 minutes. Repeat as often as possible. This is absolutely crucial during the first 2 weeks.

Using ice can help to reduce swelling but **you must ensure the bandages do not get wet.** While the bandages are on for the first couple of weeks, Mr Winters recommends having ice on for 30 minutes, then remove it for 30 minutes. You may repeat this as often as you are able. The more you ice your foot, the quicker the swelling will go down. As the swelling reduces, so may your ice applications.

When the bandages come off after your first postoperative appointment, you can ice your foot for 15 minutes and then allow a 30-minute break before icing it again. **Do not use ice if you have circulatory or sensation deficits.**

Whenever you sit down to rest, put your foot up to help with swelling. Continue to elevate your leg on some pillows when you sleep, only stopping this when there is no more swelling in the ankle, foot or toes.

How long will I be off work?

Most people return to office type work after 2 weeks. People with more physically strenuous jobs may need longer.

When can I drive?

Driving short distances is usually possible after 2 weeks if the operation is performed on your left foot and you drive an automatic car. If the operation is performed on your right foot or you drive a manual car, you will not be able to drive for approximately 8-10 weeks after surgery. Do not drive until you are pain-free and feel able to drive safely, (i.e. perform an emergency stop safely and effectively). It is your responsibility after an operation to check with your insurance company whether you are covered to drive.

When will I be seen again?

Mr. Winters will usually see you in a post-operative clinic between 2 & 3 weeks after your surgery. This can sometimes take place in a different location to where you had your surgery, so please check with his rooms. You will be seen again 6 weeks after your surgery with an X-ray.