# **Bunions**



#### What are bunions?

The term bunion refers to a lump or prominence on the side of the big toe joint. When this occurs, the big toe also tends to lean towards the second toe. The medical term for this condition is Hallux valgus.

Bunions often rub inside shoes, which can cause inflammation (redness) and pain. Not all bunions are painful and some people can have large bunions without experiencing much pain. However the turning of the big toe can cause pressure on the second toe, which can then become deformed (a hammer toe). In some cases, the first two toes will cross over, which can then cause a lot of pain in shoes and can make it hard to walk.

#### What causes bunions?

Hallux valgus tends to run in families. In other words, there is strong genetic link and the majority of people with bunions have a family member with the same problem. Approximately 1/3rd of the population will develop a bunion at some stage in their lives, so it is a very common problem.

Tight footwear can also be important and it is likely that this contributes to the development of bunions in people who are already genetically at risk. This probably explains why the condition is much more common in females than males. In other words, high heeled and pointed toe shoes are not the primary cause of the problem, but such footwear can accelerate the condition.

Other causes of Hallux valgus include injury, arthritis and muscle imbalance.

### **Non-surgical solutions**

Around half of all bunion sufferers do not need surgery. The aim of nonsurgical treatment is to relieve pressure on the bunion and in so doing, to try to prevent the development of pressure sores and ulcers.

In some cases, comfortable, well-fitted shoes are sufficient to alleviate pain. In other cases, a podiatrist can make an inner sole to go inside the shoe which may also help with symptoms. It is important to address any abnormalities in biomechanics (foot and lower leg posture during movement).

The Sussex Foot and Ankle Centre offers an integrated, multi-disciplinary approach, with specialist foot and ankle surgeons working closely with podiatrists and physiotherapists.

# sussexfoot&anklecentre

The Sussex Foot & Ankle Centre was founded in 2005 by two orthopaedic surgeons, David Redfern and Stephen Bendall, with the aim of providing a high quality specialist service for the diagnosis and treatment of all foot and ankle problems. Both orthopaedic surgeons are specialists in problems affecting the foot and ankle and have many years of experience. They operate the service with outpatient clinics at the Brighton and Haywards Heath Nuffield Hospitals.

The sussex foot and ankle center strives to provide the best advice and treatment for all foot and ankle problems. This includes sports injuries and trauma, bunions, metatarsalgia, and arthritis. Both surgeons have particular interests in minimally invasive surgery and are at the forefront of developing such techniques in this country.

Both surgeons are also academically very active and have appointments within the national (BOFAS) and international (EFAS) professional foot and ankle surgery societies.

# **Treatment for bunions**

## **Bunion surgery**

There are many different types of bunion surgery. Modern techniques are generally very much more reliable than some of those used in years gone by. A specialist orthopaedic foot and ankle surgeon will not rely upon just one type of operation to treat all bunions. As we know, "one size does not fit all". Bunions vary in their features and the type of surgery needs to be tailored to the type of deformity, the foot type, and the patient's lifestyle. After a detailed assessment the surgeon will discuss the surgical options with you and will explain what is involved with an operation in terms of recovery and risks, as well as other practical aspects of the surgery.

At The Sussex Foot and Ankle Centre we regularly use a procedure called the Scarf Osteotomy. This relatively new operation has transformed bunion surgery because it does not involve destroying the big toe joint. It gives the surgeon more control in obtaining adequate correction of the bunion and in preserving or correcting foot mechanics.

We are also at the forefront of minimally invasive ("keyhole") surgical techniques for correcting bunions and hallux valgus deformity.

We train orthopaedic surgeons nationally in both open and minimally invasive techniques.

The bones are cut and then held in the correct position using specialised screws without heads. This means the metalwork is buried and cannot be felt. It also means that the bone fragments are held very rigidly together in the desired position whilst they heal. The use of these screws has abolished a lot of the pain that used to be associated with older techniques without screw fixation. New techniques overcome many of the problems associated with the older procedures by maintaining the anatomy of the foot.

All bunion surgery is associated with stiffness of the big toe joint and if this is not treated, it can persist. Modern techniques use rigid bone fixation, which allows for early mobilisation of the big toe joint.

Physiotherapy can be a very useful tool in the recovery of patients from bunion surgery. Physiotherapists are able to speed up the recovery process by instituting early mobilisation and working on techniques to reduce swelling. Here at the Sussex Foot and Ankle Centre we have a work closely with physiotherapists specialising in foot and ankle conditions.

(Bunion surgery has a reputation for being very painful. This is because older techniques involved destroying the big toe joint and not using any form of fixation. This meant that the bone ends were still mobile rather like a fracture and not surprisingly this was a cause of considerable pain and a long period of recovery. Modern techniques with specialist screw fixation as outlined above have drastically improved recovery and the vast majority of patients experience very little pain after surgery).

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