

BUNION

(Hallux Valgus)



■ ■ ■ Description

A bunion is a bony protrusion (bump) from the inside edge of the joint at the base of the big (first) toe. The first toes points toward the smaller toes.

■ ■ ■ Common Signs and Symptoms

- An outward-turned first toe that may overlap the second toe
- Thickened skin over the bony protrusion at the base of the first toe (callus)
- Occasionally, fluid accumulation under the thickened skin; fluid may become red, tender, and swollen (inflamed) with constant irritation or pressure
- Foot pain and stiffness

■ ■ ■ Causes

- Many causes exist, including genetics (you are born with or predisposed to it, with others in your family having it) and when the big toe is forced into a position in which it overlaps other toes.
- Bunions are associated with wearing shoes with a narrow toe box (pointy shoes).

■ ■ ■ Risk Increases With

- Family history of foot abnormalities, especially bunions
- Arthritis
- Narrow shoes, particularly with high heels

■ ■ ■ Preventive Measures

- Wear wide-toed shoes that fit well. Avoid shoes with high heels.
- Wear a small pad between the big toe and second toe.
- Maintain appropriate conditioning:
 - Foot and ankle flexibility
 - Muscle strength and endurance

■ ■ ■ Expected Outcome

Bunions are usually curable with treatment and preventive measures to prevent recurrence. Occasionally, surgery is required.

■ ■ ■ Possible Complications

- Infection of the bunion
- Inflammation and arthritic changes of the great (first) toe
- Risks of surgery, including infection, bleeding, injury to nerves (numb toe), recurrent bunion, overcorrection (toe points inward), arthritis of the big toe, big toe pointing upward, bone not healing

■ ■ ■ General Treatment Considerations

Initial treatment consists of rest from the offending activity and medications and ice to help reduce inflammation and

pain. Wear shoes with a wide toe area. Shoe modification by a shoe repair person to relieve pressure on the bunion may also be useful, particularly if one cannot find shoes with a wide enough toe area. A pad with the center cut out to reduce pressure on the bunion is of benefit. Occasionally an arch support (orthotic) may help reduce pressure on the bunion and eliminate the symptoms. Stretching and strengthening exercises of the muscles of the foot may be useful. Wearing a brace or pad at night to hold the big toe away from the second toe may also provide relief. If these treatments are not successful, surgery may be necessary to remove the overgrown tissue (bunion) and correct the position of the first toe by realigning the bones. This is usually performed on an outpatient basis (you go home the same day). The surgery may involve cutting bone at the first toe, in the mid-portion of the foot, or just reconstructing (cutting and repairing) the ligaments and soft tissues around the first toe.

■ ■ ■ Medication

- Nonsteroidal anti-inflammatory medications, such as aspirin and ibuprofen (do not take within 7 days before surgery), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur.
- Topical ointments may be of benefit.
- Pain relievers may be prescribed as necessary by your physician. Use only as directed and only as much as you need. These are usually only prescribed for postsurgical pain.

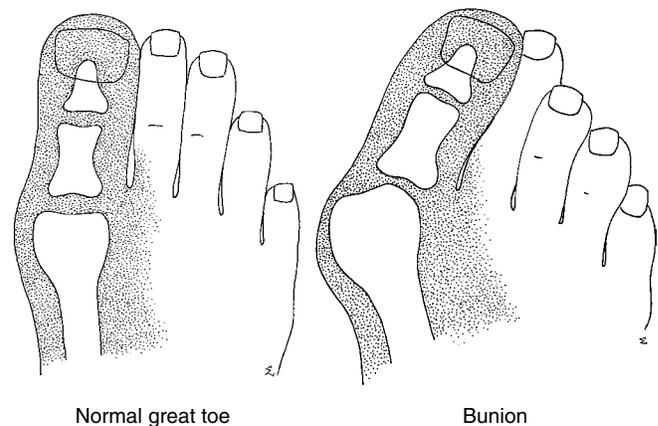


Figure 1

From Economou SG, Economou TS: Instructions for Surgery Patients. Philadelphia, WB Saunders, 1998, p. 127.

■ ■ ■ Heat and Cold

- Cold is used to relieve pain and reduce inflammation for acute and chronic cases. Cold should be applied for 10 to 15 minutes every 2 to 3 hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage.
- Heat may be used before performing stretching and strengthening activities prescribed by your physician, physical therapist, or athletic trainer. Use a heat pack or a warm soak.

■ ■ ■ Notify Our Office If

- Symptoms get worse or do not improve in 2 weeks despite treatment
- After surgery you develop fever, increasing pain, redness, swelling, drainage, bleeding, or increasing warmth around the surgical area
- New, unexplained symptoms develop (drugs used in treatment may produce side effects)

Notes:

(Up to 4400 characters only)

Notes and suggestions