

# Kellers excisional arthroplasty

For the correction of an arthritic big toe



## Information for patients

Department of Podiatric Surgery

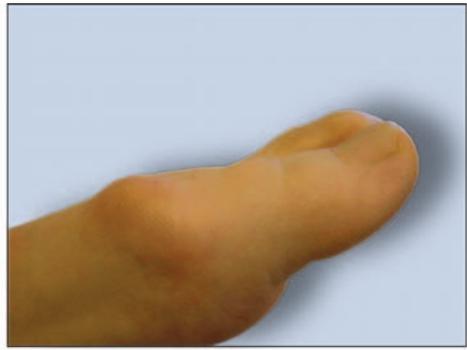


## What is hallux rigidus?

The term hallux rigidus means 'stiff great toe'. This is usually caused by arthritis at the base of the big toe. It commonly affects active and sporty people as a result of repeated trauma. The stiffness, which causes pain of the toe is especially noticeable on the upward bending that is caused by walking or running. As well as the pain and stiffness, hallux rigidus causes a bump on the top of the big toe.



**X-ray appearance of joint**



**Clinical appearance of joint**

## What are the treatment options?

There are surgical and non-surgical options to treat pain in the big toe joint.

### Non-surgical options

Non-surgical options usually focus on symptom management but will not cure the arthritic changes that have already occurred. Management can include:

- Activity modification
- Footwear that is stiff soled, wide and deep enough to accommodate the shape of your foot (you may request a footwear advice leaflet for further information)
- Joint injections

- Use of orthoses (insoles that fit into your shoes)
- Painkillers

## Surgical options

Although there are several procedures that can be used to treat this condition, the clinical team will discuss the various options and the reason for choosing this one (Kellers excisional arthroplasty).

Surgery is usually recommended if you are experiencing pain and limitation / disability along with:

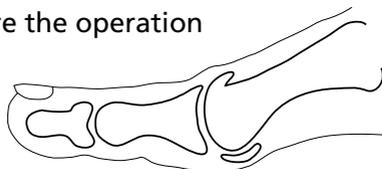
- Bony enlargement of the big toe joint
- Arthritis of the big toe joint

## What is a Kellers excisional arthroplasty?

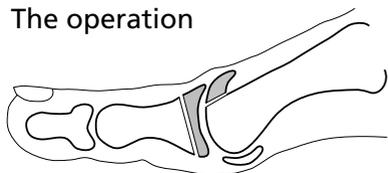
This procedure is used to treat arthritis in the big toe. The procedure involves removing the base of the big toe, soft tissue is then folded into the space that is left to form an artificial fibrous joint.

### Step by step diagram of procedure

Before the operation



The operation



After the operation



## **What are the benefits of surgery?**

The intended benefit of surgery is to reduce your level of discomfort, where non-surgical options have failed.

## **Are there any risks?**

Along with the general risks of surgery which are explained in the risks of surgery information leaflet, the main risks with this procedure are:

- Shortening of the big toe
- Reduced function / strength of the big toe
- Deformity of the big toe
- Pain under the ball of the foot

## **How long will the operation take?**

You will be admitted to the day surgery unit for approximately 4 hours. The procedure itself takes approximately 30 minutes.

## **Will I have a plaster cast?**

There is no need for a plaster cast following this procedure, though you will have some bulky dressings and a post-operative sandal on for 2 weeks after the operation.

## **Will I have any screws, wires or pins in my foot?**

Occasionally we put a wire(s) through the toe for up to 4 weeks to hold it in position whilst it heals. This will protrude from the end of the toe and will need to be protected. Normally, this is removed in clinic with minimal pain although, infrequently you may need to return to theatre (day surgery) for a wire removing.

## **How long will I need off work?**

Typically, you will be off work for 4 weeks following this procedure. Depending on your occupation, you may require longer in some circumstances.

## **Who can I speak to if I would like more information?**

It is important that you understand what the procedure involves before giving consent. This includes any potential risks, benefits and alternatives.

Although these will be explained to you beforehand please don't hesitate to ask either your consultant or one of the team if you have any further questions.

## The day of the operation

The operation is usually performed under a local anaesthetic which means that you will be awake. You can **eat and drink as normal and take any prescribed medications** on the day of operation (unless advised otherwise).

On admission, the team will go through some paperwork with you. After this, you will have some injections around the ankle to numb your foot. You will be taken through to theatre where the operation will be performed.

After surgery you will have time on the ward to recover from the operation. The team will go through all of your post-operative advice with you after which you will be able to leave.

For your safety you must have a competent adult at home for the first day and night after surgery. You should arrange for transport home with a relative / friend ideally by car but by accompanied taxi if necessary. You should not go home by public transport.

## First 2 - 4 days

- This time should be spent resting with your foot elevated as much as possible.
- Keep your ankle moving up and down.
- Ensure you drink plenty of fluid, though avoid caffeine.
- Take your medications as advised with or after food.
- Use ice packs as instructed to help with pain and swelling.

## One week after surgery

- You may need to attend clinic for your foot to be checked and re-dressed.
- You may start to do a little more within pain limits. Pain may mean you are doing too much.

## **Two weeks after surgery**

- You must attend clinic again for removal of stitches.
- You should no longer need the bandage and you should be able to get around without crutches.
- Your foot will still be quite swollen but you should be able to get a roomy shoe on.
- Provided that the wound is well enough healed you should be able to get your foot wet.
- You will be advised on a gradual return to activity and may also be advised on scar care.

## **Between 2 – 6 weeks after surgery**

- The foot starts to return to normal and you can return to shoes.
- The foot will still be quite swollen especially at the end of the day.
- You may return to driving if you can perform an emergency stop, though you must check with your insurance company first.
- Whilst you can resume normal activity, you should avoid sport.

## **Between 8 – 12 weeks after surgery**

- The foot should continue to improve and begin to feel more normal again.
- There will be less swelling.
- Sport can be considered after 3 months, depending on your recovery.

## **Six months after surgery**

- You will have a final review 6 months following surgery.
- The swelling should now be slight.
- The foot will continue to improve up to 12 months after your operation.

## Twelve months after surgery

- The foot has stopped improving and all healing is complete.
- Any remaining swelling should be minimal and you should be feeling the full benefit of surgery.

## Who do I contact if I would like any further information?

If you have any questions about the procedure or would like further information please call us on:

- **0114 271 4668**



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