Scarf and Akin osteotomy
For the correction of bunions

Information for patients
Department of Podiatric Surgery
What is hallux valgus?

The big toe of the foot is called the hallux. If the big toe starts to deviate inward in the direction of the little toe the condition is called hallux valgus. As the big toe drifts over into valgus, a bump starts to develop on the inside of the big toe over the metatarsal bone. This bone prominence on the inner edge of the metatarsal is referred to as a bunion.

Before surgery

After surgery
What are the treatment options for bunions?

Non-surgical options

There are no non-surgical options to correct bunions. Non-surgical options can only be used to try and manage the bunion and alleviate pain. The options are:

- Modifying your activity
- Correct fitting or accommodative footwear
- Joint injections

The use of protective and cushioning shields, splints and or insoles / orthoses may improve comfort. However, the use of insoles / orthoses or toe splints has not been shown to correct toe deformity.

Surgical options

Severe deformity can only be corrected using surgery. There are 2 types of surgery:

- Akin osteotomy
- Rotation scarf

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

- Deformity of the big toe
- Arthritis of the big toe joint
- Difficulty with shoe fit despite wearing sensible footwear

What are the benefits of surgery?

- Reduction in pain and deformity
- Reduction of the misalignment which is the cause of the deformity
- Reduction of callus / corn formation
- The procedure is localised which does not involve other joints
Are there any risks?

The general risks of foot surgery are outlined in the pre-operative information booklet which you will have already received. In addition to this there are the following specific risks for this procedure:

- Joint stiffness, 8%
- Over-correction, 4%
- Pain in ball of foot, 6%
- Revision surgery, 2%
- Footwear restriction, 14%
- Problems with removal of screws / wires, 25% over 10 yrs
- Big toe joint pain, 6%
- Wound infection, 4%

How long does the operation take?

The operation usually takes between 30-45 minutes.

Is this a day procedure?

Yes, you can usually go home the same day (you will usually be admitted for half a day).

How long will I need off work?

This will depend on the job you do and the speed of your recovery. For non-manual work, we usually recommend approximately 4-6 weeks. For manual work approximately 6-8 weeks.
Who can I speak to if I would like more information about the procedure?

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.

Scarf and Akin osteotomy

The operation

The operation is usually performed under a local anaesthetic. This being the case you will be awake; you can eat normally and take your normally prescribed medications on the day of the operation.

The local anaesthetic is administered via injections around the area of the bunion and the ankle. Most patients find this to be more comfortable than a dental injection. Sometimes an injection behind the knee will be offered.

The operation takes about an hour, although you can expect to be in the day surgery unit for about 3 hours. This is to allow you an opportunity to rest after the operation and for us to provide you with discharge information and packs as required.

For your safety you must have a competent adult at home for the first day and night after surgery.
First 2 to 4 days

- This is the worst time for pain but you will be given painkillers to help.
- You must rest completely for 2-4 days with your foot elevated just above hip level. You may be advised to keep the circulation going by gently drawing circles in the air or wiggling your toes.
- You should restrict your walking to going to the bathroom only. If you have been given crutches you must use them in the way shown.
- You may be able to bear a little weight on the foot carefully using just the heel. You should be able to get about a little more after 3-4 days.

One week after surgery

- You may need to attend the 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 the clinic again for removal of stitches. For absorbable stitches this normally means just trimming the ends.
- 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. You should bring a lace-up broad fitting and supportive shoe (ideally a trainer) with you.
- Provided that the wound is well enough healed you should be able to get the foot wet.
- You will be advised on an gradual return to activity and may also be advised on exercises and scar care.
Between 2 and 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 require a review appointment at 4-6 weeks.
- You may be able to return to work but may need longer if you have an active job. If in any doubt please discuss this with a member of the team.
- You may return to driving after 6 weeks if you can perform an emergency stop. You must check with your insurance company before driving again.
- Whilst normal activity will be resumed, sport should be avoided.

Between 8 and 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 between 3-6 months following surgery.
- The swelling should now be slight and you should be getting the benefit of surgery.

Twelve months after surgery

- The foot has stopped improving with all healing complete.

Please note if a complication arises, recovery may be delayed.
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