Kidner procedure
For the treatment of accessory navicular

Information for patients
Department of Podiatric Surgery
What is an accessory bone?

An accessory bone is an additional bone/bony segment which is not usually seen as part of the normal structure of the foot. Accessory bones may arise in several areas of the foot. This leaflet concentrates on the accessory navicular bone which is found on the instep of the foot often within the tibialis posterior tendon.

What are the treatment options?

Non-surgical options

- Immobilisation with casting
- Insoles
- Footwear modification
- Analgesia (pain relief)
- Hydrocortisone injections
Surgical options

- Surgical removal of the accessory bone.

What are the benefits of surgery?

Reduce pain and deformity and pressure from footwear.

Are there any risks?

- Weakness or rupture of overlying tendon which may cause pain and progressive flat foot deformity requiring further remedial or surgical treatment
- Tightness or stiffness of the foot causing pain
- No improvement in symptoms
- Altered walking pattern

How long does the operation take?

Approximately 45-60 minutes.

Is this a day procedure?

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

Will I have a plaster cast?

Yes, a cast is usually necessary.

Will I have any screws or pins in my foot?

Yes, you will usually require a small screw to secure the tendon to the bone. This can stay in permanently and removal is not usually required, although may be necessary in a small number of cases.
How long will I need off work?

This will depend on your job and the speed of your recovery / rehabilitation. For non-manual work, we usually recommend approximately 6-8 weeks. For manual work up to 12-14 weeks.

Please note: recovery times are only intended as guidance and may be subject to change in the event of delayed healing / individual progress.

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 to surgery. Although these will be explained to you beforehand, please don't hesitate to contact one of the team on the numbers provided in this leaflet if you have any further questions.

Kidner procedure for accessory navicular bone

The day of the operation

The operation is usually performed under a local anaesthetic which means you will be awake. You can eat normally and take your normally prescribed medications on the day of the operation unless advised otherwise.

The local anaesthetic is given via injections around the ankle and/or knee. Most patients find this to be more comfortable than having a dental injection. The operation can take up to 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.
First 2 - 4 days

- You will be placed in a non-weightbearing cast.
- 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 should restrict your activity to going to the bathroom only. If you have been given walking aids, you must use them in the way shown.

One week after surgery

- You will need to attend the clinic for your foot to be checked and re-dressed.
- You will remain in a non-weightbearing cast but may start to do a little more within pain limits. Pain may mean you are doing too much.
- For your safety you must have a competent adult at home for the first 48 hours after surgery.

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 may be transferred from a non-weightbearing cast into a removable weightbearing boot, depending on your progress.
- Provided that the wound is well enough healed you should be able to get the foot wet.

**N.B.** If you were advised against getting the foot wet, it is recommended that you wash using a sink for hygiene, or obtain a Limbo or seal-tight 'cast protection device' to allow you to have a brief, non-weightbearing shower. These are available from: https://limboproducts.co.uk/ or http://www.seal-tight.co.uk/
• You may be advised to undertake some basic exercises which will be demonstrated by the clinical team.

**Between 2 - 6 weeks after surgery**

• The foot will still be quite swollen especially at the end of the day.
• You will be reviewed periodically to monitor your progress.

**Between 8 - 12 weeks after surgery**

• You will be able to return to driving during this period but this will depend on your personal recovery.
• The foot should continue to improve and begin to feel more normal again. There will be less swelling.
• Sport can be considered after 4 months, depending on your recovery
• You will be advised regarding your rehabilitation by one of the clinical team or we may arrange for you to be seen by one of the physiotherapists if we feel it may be of further benefit to 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 recovery rates can be delayed in the presence of complications and according to patient specific factors such as general health.

Who do I contact if I want some more information?

If you have any comments, concerns or queries and would like to speak to somebody about them please telephone:

- 0114 271 4668