

First MTP Joint Arthroplasty

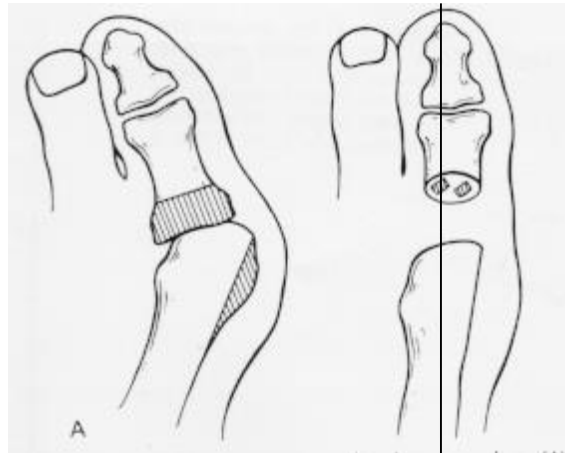
This is needed when the big toe joint is too worn or damaged to preserve, and too painful or troublesome to leave without surgery.

One of the main treatments, if a fusion is not recommended, is to remove a section of the joint and place a tendon “cushion” inside the joint, which leaves the joint flexible. This has the advantage of being a straightforward procedure that leaves the toe able to bend.

The disadvantages are that the big toe tends to be less functional and less stable than following other procedures. It is however, a very satisfactory procedure for many people.

Your success rate for this surgery is 80-90%

You will need a wire in your toe for 6 weeks, which is removed in clinic.



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Problems associated with First MTP Arthroplasty Surgery

- Thickened scar and/or tender scar – generally reduces over 12 months. Your risk of this is 1 in 2
- Infection - sudden increase in pain and swelling at 2 – 3 days after surgery or sometimes at a later stage. Your risk of this is low (1 in 100)
- Insufficient correction maintained and/or recurrence of deformity
- Shortening/Dysfunction of the big toe causing 2nd toe to be prominent & painful
- Deep Vein Thrombosis (DVT) - A blood clot in the calf or thigh in the muscles of the leg is possible with any surgery. Your risk is very low (less than 1 in 250)
- Complex Regional Pain Syndrome (CRPS) - Pain, which will not resolve. Occasionally the ‘pain tap’ is turned on with surgery and does not switch off again. Your risk is extremely low (less than 1 in 1000)
- Post-operative swelling – can last for up to 2 months