Every patient is different, and individual results will vary. Consult your doctor to determine if foot surgery is right for you. For additional information on Wright bunion corrective products, please visit wmt.com/footandankle/forefoot

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Introduction

Your feet, along with all of their multiple joints, are among the hardest working parts of your body. For example, most of your weight is supported by the big toe and the big toe joint when your foot pushes off the ground while walking. Since it is so important to your mobility, any issue with your big toe can make jogging, walking, or simply standing a painful chore. A common problem of the foot is degenerative arthritis, which is a condition that slowly wears away joints (where the bones meet and move against one another). Arthritis located specifically at the base of your big toe is called hallux rigidus. At first you may notice stiffness and/or aching in the joint. As the lining of this joint (cartilage) breaks down, the bones begin to rub against one another, causing pain, swelling, and eventually your range of motion may become limited. If nonsurgical treatment does not relieve your pain, your doctor may recommend foot surgery with an implant or other products manufactured by Wright. Facing surgery can be daunting. However, Wright has decades of experience producing revolutionary products which provide hope every day for patients, such as yourself, who are struggling with pain and unable to live the active lifestyle they once did.
What Causes Foot Arthritis?

Many surgeons feel that arthritis in the foot begins with an injury to the soft cartilage lining the joints, such as from stubbing the big toe. A seemingly small incident like this can trigger a wear process in the joint lasting years before symptoms become obvious.

Foot arthritis may also be associated with overuse. People who perform repetitive activities or jobs that increase stress on the big toe, such as stooping or squatting, may be at a higher risk of developing arthritis.

Other cases of foot arthritis seem to occur without any type of serious injury. These cases are believed to run in the family, and result from inheriting a foot type that is prone to developing arthritis. Minor differences in the foot’s structure may make some individuals more likely to develop arthritis than others. These small imperfections in the foot’s anatomy may increase stress on the joint while walking. Over time, this added stress may result in arthritis of the joint.

Your foot and ankle surgeon can determine the cause of your arthritis and recommend the best treatment for you.

Symptoms

Early signs and symptoms include:

- **Pain and stiffness in the big toe during use** (walking, standing, bending, etc.)
- **Pain and stiffness aggravated by cold, damp weather**
- **Difficulty with certain activities** (running, squatting, etc.)
- **Swelling and inflammation around the joint**
As the disorder gets more serious, additional symptoms may develop, including:

- Pain, even during rest
- Difficulty wearing shoes because bone spurs (overgrowths) develop
- Dull pain in the hip, knee, or lower back due to changes in the way you walk
- Limping (in severe cases)

**Diagnosing Foot Arthritis**

To determine the best treatment for your problem, your doctor may assess the frequency and intensity of your foot pain. He or she will likely examine how far and how smoothly the affected joint moves. Your doctor may also watch how your feet rotate and flatten as you walk to evaluate if incorrect foot mechanics are causing your problem.

X-rays are often used to check for bone problems or to rule out other causes of pain and swelling. Blood tests or arthrocentesis (removal of fluid from a joint for testing), are sometimes performed to analyze the existence of problems that can cause joint pain and swelling. These problems might include gout, rheumatoid arthritis, or joint infection.

**Treatment of Foot Arthritis**

If your symptoms are mild, anti-inflammatory medications may be prescribed to reduce pain and swelling. Special shoes may also be worn to reduce the amount of stress on the toe during walking. For painful or more severe arthritis, your doctor may recommend outpatient surgery.
In some cases, pain is reduced or eliminated only through surgery. Arthritis in the foot may be treated through several types of procedures. Common types of surgery for arthritis include:

- **Chilectomy** – Removal of bone spurs at the top of the joint. This allows the toe to bend better and reduce the amount of pain while walking.

- **Arthroplasty** – Replacement of the joint with an artificial implant. This procedure removes one or both of the joint surfaces and is replaced with metal, plastic, or silicone.

- **Arthrodesis** – Fusion of the big toe joint to remove the damaged surfaces of the joint, thereby eliminating motion and minimizing pain. The two bones of the joint grow together, becoming a single bone.

- **Arthrodiastasis** – The use of an external fixator to maintain joint motion, correct joint alignment, and preserve toe length.

**Arthritis Solutions from Wright**

Many of Wright's products can be used to assist your doctor in treating your foot arthritis. These products range from plates and screws, to arthroplasty implants and external fixation solutions. Depending on the type of procedure required, your doctor may choose one or more Wright products for your surgery.
Who Is Wright?
Wright’s origins date back to 1950 in Memphis, Tennessee by Frank Wright. He created the company to distribute a rubber heel support for walking casts. From this simple beginning, Wright has become a global orthopaedic device manufacturer with over 1,200 employees in over 60 countries.

The growth of Wright results from our ability and drive to create new surgical technologies with striking efficacy for patients and surgeons. Many of these technologies were “firsts” in the orthopaedic industry. This spirit of invention leads Wright to continually innovate.

Why Would Your Surgeon Select a Wright Product for Your Surgery?
With Wright, both you and your doctor have options. Wright is widely recognized as the leader in foot and ankle surgery. Surgeons rely on Wright to help deliver the best result for their patients. Wright boasts an industry-leading portfolio of foot and ankle solutions, all designed with the best possible patient outcomes in mind. If your surgeon recommends a Wright product for you, you’ll receive some of the most technologically advanced solutions available today.

Potential Risks of Surgery
In any surgical procedure, the potential for complications exists. The potential risks and complications with products used in foot surgery include infection, pain, inflammation and swelling at implant site, allergic reaction to implant material(s), loosening or dislocation of the implant resulting in revision surgery, deterioration or loss of bone, over-production of bone, blood vessel blockage, and negative bodily response due to implant rejection and/or implant wear debris.
A successful foot surgery can both reduce pain and swelling. However, for best results, see your doctor as scheduled and follow all recovery instructions carefully.

**Healing Takes Time**
Your foot will be bandaged after surgery. If soft tissues were shifted, you may be given a splint to limit foot movement for several weeks. In such cases, the majority of healing should occur within a few weeks. If bone was cut, you may need to wear a surgical shoe or your foot may be placed in a cast. You may also need to walk with crutches or a cane until the foot can bear weight. Depending on the extent of the repair, the usual recovery period is 6 weeks to 6 months. In extreme cases, complete healing may take as long as 1 year.
Frequently Asked Questions

Q. Can foot arthritis be prevented?
A. One’s ability to prevent arthritis is unlikely. Whether your arthritis is caused by a prior injury, or repetitive stress due to work or other activities, the damage to your joint is often done long before symptoms arise. Other cases may not be avoidable due to inherited defects in your foot’s anatomy. The sooner arthritis is diagnosed, the easier it is to treat. In many cases, early treatment (with special shoes, orthotics, medications, and/or physical therapy) may prevent or postpone the need for surgery.

Q. When is surgery appropriate for arthritis?
A. Only you and your doctor can determine the correct course of treatment for you and your condition. Surgery should be the last step and should be considered when other alternatives have proven ineffective and when foot pain significantly impacts the activity and quality of your life.

Q. Will my arthritis return after surgery?
A. Surgical correction of arthritis seeks to address the particular joint affected, and is often very successful. However, arthritis may return after surgery, especially if you continue to participate in activities which are stressful to the foot. To reduce the risk of arthritis returning, comply fully with all your doctor’s recovery instructions.

Q. Will surgery change the appearance of my foot?
A. Any procedure that requires an incision in the skin will naturally result in light to moderate scarring. Also, by correcting the mechanics of the joint, many procedures can result in changes to the shape of your foot. Your expectations may influence your satisfaction with the surgery. Discuss your expectations with your doctor.

Q. Will I lose any flexibility?
A. Depending on the procedure you receive, flexibility of your big toe joint may either increase or decrease, which may be a concern if you are active and need a full range of motion in your foot. Discuss your expectations with your doctor to determine which type of surgery is right for you.

Q. When will I be walking again?
A. Most procedures will initially limit your walking. With certain procedures, you may be able to return to normal daily activity with some limitations as soon as one week after surgery. After some procedures, no weight can be put on the foot for 6 to 8 weeks to promote optimal healing, after which there are a few more weeks of partial weight-bearing with the foot in a special shoe or boot to keep the bones and soft tissues steady as they heal. It is very important that you fully comply with your doctor’s recovery instructions.

Q. When may I wear normal shoes again?
A. Walking casts, splints, or special shoes are sometimes used. Return to roomy, supportive shoes can happen from 1 to 6 weeks, depending on the type of surgery. Again, your doctor will provide you with recovery instructions to ensure optimal healing.