

HALLUX 1ST MTP ARTHRODESIS (big toe fusion)

Postoperative Recovery Protocol

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Type of Procedure: outpatient
Length of Procedure: 2 hours
Anesthesia: general or sedation w/ ankle nerve block

Fusion of the hallux MTP joint: what is it?

This operation is designed to glue (fuse) the big toe knuckle together. It is also called an arthrodesis of the big toe metatarsophalangeal joint. This is a very commonly performed operation for arthritis and deformity of the big toe joint. **Once fused, the big toe does not move except at the end joint.** The toe is positioned according to the need to roll off the big toe and will rest off the ground when standing. Once fusion is successful, you will be able to wear most shoes, including a high heel if desired of about one and a half inches.

Most patients can tolerate nearly any activity after fusion of the big toe, especially since their arthritis pain in the joint is relieved. Activities that require a lot of motion in the big toe, such as kneeling down when gardening, yoga, or bowling, are somewhat limited since the big toe knuckle cannot move, but patients generally find a way to accommodate for this during these specific activities. Surveys of patients after this surgery have reported successful return to sports such as tennis, golf, hiking, and even running.

General recovery factors:

- You are able to walk on your heel only the day after surgery.
- You must wear your surgical shoe or boot at all times until the joint is fused.
- You may **not walk bare foot** at all, even in the house without this shoe until the joint has fused.
- I typically recommend taking at least a week off of work to allow for pain control, elevation, and rest. This will help limit swelling and optimize wound healing. Patients with sedentary jobs can generally return to work whenever they are comfortable, especially if they can elevate the foot at their desk throughout the day. Patients with jobs that require standing or a lot of walking activity may be limited until they can fully bear weight on the operative leg.
- For left foot surgery, you may drive when no longer taking regularly scheduled narcotic pain medication, usually at 5 days after surgery. For the right foot, you may start driving at 6 weeks.
- The surgical shoe is worn for 6-8 weeks, after which you may transition back into a comfortable shoe.

Specific postoperative course (these are general guidelines, your specific individual postoperative treatment may be different):

Day 1-2

- The foot is wrapped in a bulky bandage and surgical shoe.
- Ice, elevate, take pain medication.
- Expect numbness in the foot for 12-24 hours.
- Bloody drainage through the bandage is expected.
- Do not change the bandage.
- Do not remove the surgical shoe – even at night.

Day 3

- Generally more comfortable to start walking on your heel in the surgical shoe only.

2 Weeks

- First follow-up in the office, stitches removed, x-rays taken.
- May shower when the incision remains completely dry.
- No soaking the foot in a bath or tub.
- Continue use of the post-op shoe at all times except when showering.

6 weeks

- Second follow-up in the office, x-rays taken.
- If bone looks healed, may transition from surgical shoe to comfortable shoes.
- May begin light activity (swimming, stationary bike, elliptical trainer, walking)
- Avoid pushing off on the big toe for one more month (that means any running, jumping, climbing activities).
- A shoe stiffener (carbon fiber plate) is important for one to two months as you resume activity.
- No heels are worn for two more months.

Example of a 1st MTP fusion: most often a plate and screws are used. The fixation/hardware used in your case will vary upon your anatomy. Note how the toe does NOT rest on the ground.

