



Surgical Treatment for Bunions

WRIGHT.

The Leader in Foot & Ankle Surgery.

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Patient results may vary. Please consult your physician to determine if these products are right for you.

For more information about Wright's products or prescribing information, including warnings and contraindications, please visit **www.wmt.com**.

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Introduction

Your big toe and its associated joint are the hardest working parts of your foot. 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. One of the most common problems of the big toe is called a **bunion**, which is defined as an excess or misalignment of the bone at the big toe joint. Bunions may be painful and they often drastically change the shape of your foot, limiting your choices in footwear and activities. If nonsurgical treatment has not relieved your pain, or if you have a severe bunion, you may want to consider surgery. Your doctor may recommend foot surgery with an implant 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.

Normal
Foot



Foot with
Bunion



What Causes Bunions?

Foot problems, such as bunions, often develop in early adulthood and worsen with aging. While there are many contributing factors, bunions are primarily thought to be hereditary and may be just one of several problems of weak or poor foot structure. Additionally, bunions can be aggravated by arthritis. For some people with leg length discrepancies, bunions tend to form on the foot of the longer leg, due to excessive pronation, or the inward rolling of the foot.

However, the greatest cause of bunions for those with a genetic predisposition is years of wearing tight, poorly fitting shoes – especially high-heeled and pointed shoes. While this leaves women especially prone to developing bunions, anyone who wears shoes that gradually squeeze the foot bones into an unnatural shape may eventually develop bunions.



Additionally, you may get bunions if:

- The unique shape of your foot puts too much pressure on your big toe joint while walking. People with a family history of bunions are more likely to develop bunions.
- Your foot rolls inward too much when you walk. A moderate amount of inward roll, or pronation, is normal. But damage and injury can occur with too much pronation.
- You have flat feet, which alters the dynamics of the foot during walking.
- You have suffered previous trauma to your foot.

All of these may put unusual pressures on the big toe joint, especially while walking. Over time, these pressures force the big toe out of alignment, bending it toward the other toes, thereby creating a bunion.

Two Types of Bunions

You may have one or a combination of two basic bunion types:

- **Positional** (mild) bunions arise from the growth of new bone. As new bone grows, the joint enlarges, which stretches the joint's outer covering of tissue. Force created by the stretching of this tissue pushes the big toe toward the smaller ones. Eventually, the inside tendons tighten, pulling the big toe farther out of alignment.
- **Structural** (severe) bunions result when the joint at the base of the toe shifts position. When the angle between the bones of the first and second toes is greater than normal, the big toe slants toward the smaller ones. In severe cases, this may also cause the second and third toes to buckle.



Symptoms

Some people with bunions do not exhibit any symptoms. However, for others, bunions may create excessive nerve pain in the big toe, red or irritated skin over the bunion, or swelling at the base of the big toe. In severe cases, the big toe may point toward the smaller toes, causing them to develop problems such as hammertoe (one or more toe joints are permanently bent downward).



Diagnosing Bunions

To determine the best treatment for your problem, your doctor may assess the frequency and intensity of your bunion 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 Bunions

If a bunion is not painful or severe, your doctor may simply recommend that you wear a different shape or style of shoe, or you may be prescribed custom-made shoe inserts to correct your foot mechanics. For painful or severe bunions, outpatient surgery may be recommended.

Bunion Surgery

There are over 100 different surgical procedures for bunions. Research does not indicate which type of surgery is best; surgery needs to be specific to your condition. For that reason, a combination of more than one procedure may be done at the same time. All surgeries may use a variety of orthopedic implants, from plates to pins to screws, to ensure fixation and stabilization of the joint.

The general types of bunion surgery are:

- **Exostectomy or bunionectomy** – Removal of part of the metatarsal head (the bulging foot bone).
- **Realignment** of the soft tissues (ligaments) around the big toe joint.
- **Osteotomy** – Cutting and realignment of bone with stabilization pins or screws.
- **Resection** – Removal and reshaping of bone from the big toe joint (metatarsophalangeal joint).
- **Arthrodesis** – Fusion of the big toe joint to minimize motion and pain.
- **Lapidus** – Realignment and fusion of the joint where the metatarsal (the bone in the forefoot behind the toe) joins the mid-foot.
- **Arthrodiastasis** – The use of an external fixator to maintain joint motion, correct joint alignment, and preserve toe length.



The Leader in
Foot & Ankle Surgery.



Bunion Solutions from Wright

Many of Wright's products can be used to assist your doctor in correcting your bunions. These products range from staples and screws, to plates, implants, and external fixation solutions. Depending on the type of procedure required, your doctor may choose one or more Wright products for your surgery.



CHARLOTTE™ MTP Plate
(Arthrodesis)



DARCO® BOW 2 Plate
(Reconstruction)



SWANSON Great Toe Implant
(Arthroplasty)



CHARLOTTE™ Quick Staple
(Osteotomy)



DARCO® and DART-FIRE™ Screws
(Resection or Osteotomy)



DARCO® Lapidus Plate
(Lapidus Fusion)



SIDEKICK™ CORETRAK®
Tube Fixator
(Arthrodesis Fusion
or Arthrodiastasis)

Who Is Wright?

Wright was founded in 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 Bunion Surgery

In any surgical procedure, the potential for complications exists. The potential risks and complications with products used to treat bunions include infection, pain, inflammation and swelling at implant site, allergic reaction to implant material(s), loosening or dislocation of 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.

After Surgery

Bunion surgery can both reduce pain and improve the appearance of your feet. 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 a while. 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. 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 bunions be prevented?

A. For some, proper footwear can help reduce the risk of bunions. Wear roomy shoes that have wide and deep toe boxes, low or flat heels, and good arch supports. Avoid tight, narrow, or high-heeled shoes that put pressure on the big toe joint. Also, excessive foot pronation (an inward rolling of the foot) has been linked to bunion formation. You may be able to prevent excessive pronation by wearing supportive shoes or using arch supports.

Q. When is surgery appropriate for bunions?

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 bunion(s) return after surgery?

A. Surgical correction of bunions seeks to address the underlying structural causes of bunions, and is often very successful. However, bunions may return after surgery, especially if you continue to wear narrow or high-heeled shoes. To reduce the risk of bunions returning, comply fully with all your doctor's recovery instructions.

Q. Will surgery improve the appearance of my feet?

A. Your expectations may influence your satisfaction with the surgery. For example, although surgery may improve your foot's appearance, those who make appearance their primary reason for surgery are generally disappointed in the results. 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 the big toe. Discuss your expectations with your doctor to determine which type of bunion 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, special shoes, or wooden 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.



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