

Weil's osteotomies

Following your examination and investigations you have been diagnosed with metatarsalgia and you are considering a Weil Osteomy. This section aims to give you additional information about your condition and the treatment. It is designed to give you some general details about the recovery from surgery if necessary and the common risks and complications. This section is not for self-diagnosis. Please ask your surgeon if you have any further questions.

What is it?

A Weil Osteomy is a procedure to treat metatarsalgia, which is pain in the front part of the foot, under the ball of the foot.

Why would it be performed?

Weil Osteomy is performed when a person is suffering from metatarsalgia, and other methods of treatment such as comfortable shoes, physiotherapy, shoe insoles or weight loss have not been successful. Weil's Osteomy is able to treat metatarsalgia in three ways:

By shortening the metatarsal which is too long.

By straightening hammer toes.

Or by relaxing the metatarsophalangeal joint thus allowing it to straighten and heal without pressure.

What does it involve?

X-rays are done by your surgeon prior to surgery, to measure and determine how much your metatarsophalangeal joint needs to be relaxed. A cut is made on the top of the foot, between the metatarsal bones depending if you have hammertoes, this cut will extend to the toes. The metatarsophalangeal joint, which is at the base of the toe, is opened to allow the tissues to relax, thus relieving the pressure under your foot. The bone is then fixed in its new position using a small screw or two and the cut is stitched closed.

How long would I be in hospital?

Most people who are reasonably fit can come into hospital on the day of surgery, having had a medical checkup 2-6 weeks before. After surgery, your foot will tend to swell up quite a lot. You will therefore have to rest with your foot raised in bed to help the swelling to go down. This may take anything from 2 days to a week. If you get up too quickly, this may cause problems with the healing of your foot. Once the

swelling goes down and the cuts are healing, you can go home as long as you have no complications and there is someone to collect and look after you. Your physiotherapist will show you how to walk with crutches. We will get you up as soon as possible! Most people are in hospital for 2-4 days. You may need to stay in overnight after depending on your healing and pain management. Most people are in hospital for 2-4 days.

Will I have to go to sleep (general anaesthetic)?

The operation can be done under general anaesthetic (asleep). Alternatively, an injection in the back, leg or around the ankle can be given to make the foot numb while you remain awake. Local anaesthetic injections do not always work and, in that case, you may have to go to sleep if the operation is to be performed. Your anaesthetist will advise you about the best choice of anaesthetic for you. In addition, local anaesthetic may be injected into your leg or foot while you are asleep to reduce the pain after the operation even if you go to sleep for the surgery. You will also be given painkilling tablets as required.

Will I have a plaster on afterwards?

After a Weil's Osteotomy, you usually will not need a plaster. Usually only dressing and baggages are needed, and you are able to wear a protective sandal with a stiff sole. If for some reason your bone is particularly soft or other surgical procedures have been done during this operation, a plaster will be put on which you would usually wear for 4 weeks.

What will happen afterwards?

By the time you go home you will have mastered walking on crutches without putting weight on your foot. You should go around like this for 2 weeks. You should not add weight to your foot for the first 2 weeks. During this time you should rest with your foot elevated to reduce swelling. You will be given a post-op shoe to wear. 14 days after your operation you will be seen again for a follow-up. Your plaster or bandage will be removed and the cuts and swelling on your foot checked, and stitches removed. An X-ray will be taken at this time. If all is well you will be given a special splint for your foot to help support and protect the bones while healing. You can then wear the post-op shoe over this splint.

After 2-4 weeks, you should be able to walk using crutches, only partial weight bearing on your heel. This means resting your foot on the floor for balance and to make walking easier but not putting full weight on the foot. Once your wounds have healed, you will be advised to gently start moving your toes to prevent stiffening of the joint. After 6-8 weeks you can put your weight on your foot with crutches.

Increase the weight you put through your foot gradually as pain and swelling allow. If you are in a removable boot, take this off when safe at home and move your foot and ankle about gently.

Depending on your case, you will need to consult your doctor on the healing process for your case.

How soon can I ...

Walk on the foot?

Depending on your case, your surgeon will advise you with the post-operation requirements. After your Weil Osteotomy you should walk keeping the weight off your foot for 2 weeks after surgery. Thereafter, your surgeon will advise you at your follow-up when you can start taking some weight on the heel of the foot. It is vital to continue elevating your foot to aid the swelling in your foot. Once the swelling has subsided, you will be more mobile. You can then continue to walk on your heel until your surgeon instructs otherwise. After 6-8 weeks you can put your weight on your foot with crutches. Increase the weight you put through your foot gradually as pain and swelling allow.

Go back to work?

If your foot is comfortable and you can keep your foot up and work with your foot in a special shoe, you can go back to work within 3-4 weeks of surgery. Depending on what surgery was done in conjunction with the arthroscope, this may differ. In a manual job with a lot of dirt or dust around and a lot of pressure on your foot, you may need to take anything up to 6 months off work. How long you are away from work will depend on where your job fits between these two extremes and what operation you have had.

Drive?

Most people prefer not to drive until the plaster is off, they can wear a shoe and are able to fully weight bear. Drive short distances before long ones. If you cannot safely make an emergency stop your insurance will not cover you in the event of an accident. If only your left foot is operated on and you have an automatic car, you can drive within a few weeks of the operation, when your foot is comfortable enough and you can bear weight through it.

Play sport?

This depends on the surgery you have had done in conjunction with the Weil Osteotomy. Between 6 and 8 weeks after your Weil Osteotomy, you can start increasing exercise. Begin with walking or cycling, building up to more vigorous exercise as comfort and flexibility permit. Obviously, the foot will be stiffer after surgery and you may not be able to do all you could before. However, many people find that because the foot is more comfortable than before surgery they can do more than they could before the operation. Most people can walk a reasonable distance on the flat, slopes and stairs, drive and cycle. Most people are able to get back to their previous activities within 6 months after their surgery.

Risks

Only about 2 in 10 people do not have good results following this surgery. This happens when measurement that is needed to relax the metatarsophalangeal joint is off, meaning you will still have discomfort and pain after the surgery.

This surgery may not always solve the issues related to metatarsalgia, as it is a complex condition to treat.

Scaring from the procedure may cause the joint to become stiff.

The nerves to the top and outer side of the foot run close to the ankle where the operation is done. In about 1 in 10 people, they are stretched or small nerve branches are cut. This produces a numb, sometimes tingly, occasionally painful, area over the top or outer side of the foot. In many people this gets better over the course of 6-8 weeks, but in about 1 in 2 of those affected it does not get better.

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Deep vein thrombosis/Pulmonary Embolus (blood clots)

Swelling after any surgery is normal, however due to the location of the swelling, the bottom of your foot tends to collect fluid due to gravity, causing additional swelling. How quickly this swelling disappears differs from person to person. However, it may be problematic if you are feeling pain or inflammation in that area.

There are general risks with any operation that include blood clots, anaesthetic complications and tourniquet complications. Generalised pain, swelling and stiffness can occur (chronic regional pain syndrome - CRPS).

