

SESAMOIDECTOMY

Information: The sesamoids are bones under the big toe. There are 2 sesamoids under each great toe that help stabilize and provide strength. Sesamoiditis is inflammation of usually just one these bones. If nonoperative treatment isn't successful, you may want surgery. If a fracture does not heal, this can also lead to inflammation and pain; requiring surgery. This consists of removal of the inflamed bone. Risks of surgery include, but are not limited to: infection, wound healing issues, scar, swelling, stiffness, pain, numbness, injury to vessels, other deformity including hallux valgus or varus, need for future surgery, perhaps a condition you may feel is worse or not much better from your preoperative status. If you need an excuse for work, please let us know before surgery. Most patients can drive and depending on your job, most can return to work in several days or 1-2wks in their special shoe.

On the day of surgery: You and your anesthesiologist will determine what is best for your surgery. Often, a block is provided by the anesthesiologist. This will decrease the amount of pain after surgery. The risks of anesthesia/block will be discussed with the anesthesiologist. You will be brought to the operating room and your leg will be cleaned for surgery. Drapes will then be placed over your leg and your entire body to keep our field clean. You will be given antibiotics before/during surgery. I will perform your surgery (perform an incision, perform the surgery as above and as we discussed in the clinic, remove the sesamoid, close the tissue/skin, and then place a special dressing and boot on your foot. After surgery, I will discuss the surgery with your guest that day. The dressing I apply must remain on until your postoperative visit.

After Surgery: You will be taken to the recovery room and sent home when the nurses and anesthesiologist think you are suitable for discharge. You will be placed into a postoperative shoe. You can walk in this device if the tibial sesamoid is removed and are not allowed to weight bear if it's the fibular sesamoid that was removed. You will be sent home on pain medicine with the hope that you can discontinue it as quickly as possible.

Postoperative Course:

2 wks – I will see you for a dressing and suture removal, x-rays, advance range of motion. Pain will be the limiting factor and you may advance based on your comfort. If the tibial sesamoid was removed, you will need to wear a toe spacer for another 4wks.

6 wks – I will see you again for repeat check and we will discontinue the boot.

8-12 wks – You will continue to advance your activities, getting back to some sense of normal

16-20 wks – You will begin to feel that this is “behind you” and although you are not fully normal/healed, you should be doing quite well. Swelling is the last issue to resolve and can be 6-12 months for this surgery. You will notice that your big toe is somewhat stiff, this is normal. I'm happy to see you at any time during the scheduled visits or unscheduled visits if you have questions/concerns. *Thank you and I will take excellent care of you!*

Disclaimer: These are general statements and may not apply specifically to your care. I may modify as needed for your individual care.