

FOOT

Bunions: hallux valgus

Painful bunions: footwear measures, bone realignment and recovery after correction.

Patient information, treatment choices, risks, recovery and a space to record your individual plan.

Understanding the condition

A bunion involves the big toe drifting towards the smaller toes, with a prominence at the base of the big toe. Symptoms may include rubbing, pain and difficulty finding shoes. Examination and standing X-rays assess alignment, joint arthritis and associated lesser-toe problems.

Treatment options

Wide shoes, protective padding, insoles and suitable pain relief may help symptoms. Surgery is usually considered for pain or functional limitation that persists; appearance alone is not a good reason. Continuing non-surgical care remains an option.

What a procedure may involve

Operations vary. A Scarf or Chevron osteotomy realigns the first metatarsal; an Akin osteotomy may adjust the big-toe bone. A Lapidus procedure fuses the first tarsometatarsal joint when appropriate. Fixation may use screws, staples or plates. Your operation is selected for your deformity.

Risks and benefits to discuss

The aim is more comfortable footwear and improved function. Risks include recurrence, overcorrection, stiffness, transfer pain beneath smaller toes, nonunion or malunion, painful metalwork, infection, nerve symptoms, blood clots and persistent pain. Perfect straightness or unrestricted footwear cannot be promised.

Any operation also carries bleeding and anaesthetic risks. Occasionally, complex regional pain syndrome causes prolonged pain and sensitivity. Your health and the extent of surgery change your personal risk.

RECOVERY AND YOUR CONSULTATION

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Use this guidance to prepare your individual plan with the treating team.

Rehabilitation and aftercare

Dressings help protect the wound and toe position. Keep them dry and use the prescribed offloading shoe. Heel-only loading or other limits may apply; follow your own schedule. Toe exercises and progression to normal footwear depend on the procedure and healing.

Expected outcomes and recovery

Swelling commonly continues for months. Return to work and sport varies with the operation and job demands. Some toe stiffness may remain and a bunion can recur. Discuss any plans for both feet, because this changes practical recovery needs.

When to seek urgent help

Seek prompt advice for rapidly increasing pain, spreading redness, wound discharge, fever, new numbness or a cast or boot causing pressure. New calf pain or swelling needs urgent assessment. Chest pain or breathlessness needs emergency help: call 999.

Your consent discussion

Ask which treatment best addresses your symptoms, what alternatives are reasonable, what the main risks mean for you, and what recovery will involve at home and work. This guide supports that discussion; consent is completed with your treating team. Your individual written instructions take priority.

Sources and further reading

NHS: Bunions

<https://www.nhs.uk/conditions/bunions/>

RNOH: Bunions and lesser toe deformities

<https://www.rnoh.nhs.uk/patients-and-visitors/patient-information-guides/bunion-hallux-valgus-and-lesser-toe-deformities>

CLINICIAN-COMPLETED WORKSHEET

Your consent discussion

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This blank worksheet is not an executed consent. Complete it after clinical assessment with the treating clinician. The hospital or clinic must also complete its required consent process before treatment.

Patient name / identifier, date of assessment and communication support needed

Diagnosis, affected side / site and the proposed procedure or treatment

Reasonable alternatives discussed, including the option of no treatment

Expected benefit for this patient, limits of treatment and uncertainties

Material risks and personal risk factors - record the risks that matter to this patient

Patient's priorities, questions, understanding and agreed decision / time to consider

Treating clinician name, role and signature / date

Patient / representative name, signature and date - acknowledgement of discussion only

A signature here records a discussion; it does not replace a completed treatment consent form. You may ask further questions or change your decision before treatment.

CLINICIAN-COMPLETED WORKSHEET

Your rehabilitation and aftercare plan

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Complete this plan after assessment. The advice must match your injury or operation, imaging, wound and medical history. Do not start limb loading, remove protection or change medicines using an uncompleted worksheet.

Limb loading / weight bearing, walking aids, sling / cast / boot / brace and protection

Wound / dressing care, bathing, elevation and swelling advice

Medicines, pain relief, clot prevention and any treatment-specific restrictions

Exercises, physiotherapy, range of movement and progression criteria

Work, driving, sport and daily activities - individual restrictions / review points

Review date, imaging / tests, named clinician and routine / out-of-hours contact details

Clinician completing this plan, signature / date and patient questions

When to seek urgent help

Seek prompt advice for rapidly increasing pain, spreading redness, wound discharge, fever, new numbness or a cast or boot causing pressure. New calf pain or swelling needs urgent assessment. Chest pain or breathlessness needs emergency help: call 999.