HALLUX VARUS

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Can be Congenital or Idiopathic

Introduction

Acquired or iatrogenic
  - 2-13%
  - Can occur with any bunion correction

BEST TREATMENT IS AVOIDANCE
Introduction

Bunion Complication

- Most commonly associated with McBride procedure and lateral sesmoidectomy
- Overcorrection IM angle

Introduction

Bunion Complication

- Excessive Medial eminence resection
- Aggressive medial reefing
- Excessive lateral release

Soft Tissue Imbalance
Clinical Evaluation

- Symptomatic?
- Redness/Callus
- Fixed or Flexible
- 1st MTP ROM
- Weight bearing alignment
  - IP involved?
  - Lesser MTPs?

Radiographic Evaluation

- Bone Quality
- Arthrosis
  - IP
  - MTP
- First ray alignment
- Lesser toe alignment

Treatment

Conservative

- Typically need no treatment
- Shoe Wear Modifications
- Buddy taping
- Local padding
Operative Treatment

- Flexible Deformities
  - Simple soft tissue release
  - Tendon transfer/tenodesis
  - Endobutton

- Rigid/Arthritic
  - Fusion

Flexible Deformity

Soft Tissue Release

Flexible Deformity

Tendon Transfer or Tenodesis

- Entire extensor hallucis longus (EHL) with arthrodesis of IPJ
- Split EHL without IPJ fusion
- Extensor hallucis brevis (EHB)
Flexible Deformity

- EHL Tendon Transfer

- Split EHL Surgical Technique
  - Release Medial Capsule
  - Release AbH
  - Dorsal release for MTP hyperextension
Flexible Deformity

- Split EHL Tendon Transfer

Flexible Deformity

- Split EHL Surgical Technique

Flexible Deformity

- Split EHL Surgical Technique
Flexible Deformity
• EHL/EHB Tenodesis Surgical Technique

Complications
• Weakness of Dorsiflexion
• Recurrence

Flexible Deformity
• Endobutton Surgical Technique
Flexible Deformity

- Endobutton Surgical Technique
**Flexible Deformity**
- Endobutton Surgical Technique

**Postoperative Care**
- Reverse bunion wrap
- Weight bearing thru heel with post op shoe
- Normal shoewear and activities as tolerates at 6 weeks

**Other Options**
- Reverse Aiken
  - Sesamoid alignment
- Reverse Chevron
1st MTP Fusion
- Treatment for rigid/arthritic hallux varus
- Large deformities
- Most reproducible outcomes
- Eliminates chance of recurrence

Rigid/Arthritic Deformity
- 1st MTP Fusion

Rigid Deformity
- 1st MTP Fusion
Rigid Deformity
- 1st MTP Fusion

Failed 1st MTP Implant
- 1st MTP Fusion with structural autograft
  54 yo female with inflammatory arthritis

Failed 1st MTP Implant
- 1st MTP Fusion with structural autograft
Failed 1st MTP Implant
• 1st MTP Fusion with structural autograft

Summary
- Be conscientious about hallux valgus correction
- Reconstruction should be reserved for the symptomatic patient
- Soft tissue reconstruction is a good procedure in the right patient
- MTP fusion is probably the easiest and most reproducible operation