Hallux Varus Treatment Handout

Hallux varus is a deformity of the big toe that points away from the other toes instead of towards them. This condition can be congenital or acquired and can cause pain and difficulties with walking and wearing shoes.

Non-surgical treatment options

Non-surgical treatment options for Hallux varus include:

- Orthopedic shoes or insoles provide better support for the big toe and relieve pressure. Custom-made orthopedic insoles molded to the shape of the foot can limit the progression of the deformity and provide pain relief.
- Bunion pads to reduce pain and friction on the bunion.
- **Taping the hallux into a valgus position** if the deformity is recognized quickly enough after surgery. This may help correct a mild deformity.
- **Botulinum toxin injections** into the abductor hallucis brevis muscle under ultrasound guidance. This can provide near-total symptomatic relief for up to 12 weeks at a time.
- **Foot orthoses,** like night splints attempt to reduce symptoms, although the evidence for their efficacy is limited.

Surgical treatment options

If non-surgical methods are not effective, surgery may be recommended:

Soft tissue procedures

Soft tissue procedures are recommended if the first metatarsal is normal. These include:

- **Farmer technique**: Another surgical method used in orthopedic procedures, often for the correction of bone deformities or structural issues.
- Lengthening of the medial capsular structures: A surgical procedure aimed at elongating the
 medial capsular structures of the joints, often to improve mobility or correct deformities.
 Lengthening of the extensor hallucis longus (EHL): A procedure that involves lengthening the
 EHL tendon to alleviate tightness and improve function in the big toe.
- **Relocation of the sesamoid(s)**: Surgery to reposition the sesamoid bones, which are small bones under the big toe, to correct alignment or relieve pain.
- **Skin resection of the first webspace**: This involves the removal of excess skin between the first and second toes to improve flexibility or address other medical concerns.
- Syndactyly of the great and second toes: A condition where the great (big) toe and the second toe are fused together, either naturally or surgically, often to correct deformities or improve function.

Bony procedures

Bony procedures are indicated if there is a combined bony deformity, such as a short first metatarsal or lateral exostosis. These include:

- Lateral closing osteotomy or medial open wedge osteotomy of the first metatarsal to reduce the firstsecond intermetatarsal angle
- Interposition of a bone graft after osteotomy is needed to correct the shortening of the first metatarsal.
- Proximal phalangeal osteotomy
- · Metatarsophalangeal arthrodesis

Metatarsal osteotomy

Metatarsal osteotomy can be used to further correct any residual deformity after soft tissue procedures. It can reduce varus angulation and narrow the gap between the first and second toes.

Metatarsophalangeal arthrodesis

Metatarsophalangeal arthrodesis is the most reliable solution and is unavoidable if the joint is stiff or degenerative. It reduces the risk of failure.

References

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