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## **BUNIONS**

### **Overview**

A bunion is a bony bump that develops at the base of your big toe. Eventually, the big toe moves toward the second toe. Left untreated, the big toe can move under or overlap the second toe and begin to deform the other bones in the front of the foot (metatarsal bones). A bunion is a progressive problem that continually gets worse, but treatments can slow the deformity down and decrease pain. Surgery, however, is the only way to cure a bunion.

Bunions tend to run in families and are more common in women. Certain foot characteristics, including how much your foot flattens (pronates) when you walk, can all contribute to bunion development. Wearing tight shoes can make the deformity worse.

It is often possible to control discomfort without surgery. Wearing wider shoes and orthotic devices inside your shoes can often slow bunion progression and reduce pain. Toe spacers can also alleviate pain by realigning the toe and makes the joint feel better. Surgery may be an option if nonsurgical options don't work and your bunion prevents you from participating in your usual activities.

### **Symptoms**

Bunions aren't dangerous, but they can become uncomfortable over time. Common signs and symptoms of a bunion include:

- A visible bump at the base of the big toe
- Swelling, redness, and tenderness over the bunion
- Discomfort while walking and wearing shoes
- Burning, numbness, and tingling caused by nerve irritation
- Pressure on the big and second toe

### **Diagnosis**

We can usually diagnose a bunion by physically examining your foot. We may ask you to move your toes while you are sitting down and standing. This allows us to check the alignment of the bones in your foot and assess if the bunion is affecting your foot's range of motion.

We may order an X-ray in order to determine the severity and type of your bunion.

### **Causes and Risk Factors**

- Abnormal foot structure or mechanics - Some foot types are more likely to form bunions. For example, high arches, flat feet, or loose tendons can affect the way that weight is distributed across the structures of your feet and put more pressure on your big toe joint. Unstable feet also cause the 1<sup>st</sup> metatarsal bone to move
- Age - Bunions are more common in older people since they develop over time.

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- Tight/ill-fitting shoes - Wearing shoes that are too tight or pointed will put additional pressure on your toe joint, increasing pain and contributing to the progression of an existing bunion.
- High heels - High heels force all of your weight onto the front of your foot, aggravating the toe joints and existing bunions.
- Standing all day - Standing, walking, or running for long periods of time will put additional stress on your feet.

The pain can be caused by multiple things. Since the toe is pushed, the joint hurts because the pressure when you step is focused on only the side, not across the full joint. In addition, bunions cause you to roll off tip of toe on the side when you take a step instead of the tip of the foot. When you roll off the toe, the toe pushes back. This means that every step you take, the toe gets pushed out more.

### **Prevention and Home Treatments**

It is important to take good care of your feet. There are a number of things you can do to treat the symptoms of a bunion and prevent a bunion from developing or getting worse. Depending on your symptoms, we will usually recommend that you try nonsurgical treatments first.

To reduce pain and prevent your bunion from getting worse, we recommend the following:

Choose footwear carefully

- Never wear shoes that are too small. Buy properly fitting shoes, measured for length and width. Have them fitted later in the day when your feet may be a little larger.
- Wear shoes that are wide enough for your toes. The upper part of the shoe should be made of a soft material, to minimize pressure on the toe joint and bunion.
- Avoid high heels. Choose shoes that are no higher than 2 inches. If you are going to be on your feet all day, you may need shoes that are lower than 1½ inches.
- Have your shoes professionally stretched if they press against the bunion.
- Wear quality arch supports or orthotics. They should be stiff, not soft. Good ones are available at Dr. Chou's office.
- Wear a pad over the bunion and a gel toe separator between the first and second toes if needed.

### **Surgical Treatment**

Although nonsurgical treatments can help reduce pain and inflammation, surgery is the only way to reduce the size of a bunion or remove it completely. If you have tried nonsurgical treatments and still cannot perform your normal activities, surgery to remove your bunion and straighten the toe joint may be an option. There are a number of factors that we will discuss with you to help you decide if you wish to proceed with surgery:

- The extent of your pain or deformity and how it limits your activities.
- The likelihood that surgery will relieve the pain and make you more comfortable.
- The success rate and risks of the surgery.

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- The recovery process and expected time you will be away from work or other activities.
- Your overall health. You need to be in good health to be a candidate for surgery.

### **Surgical Procedures for Bunions**

The surgical procedures we use vary depending on the type and severity of your bunion, and we will explain the options to you. In general, surgically correcting a bunion involves some or all of the following steps:

- Removing bone where the bunion is located (bunionectomy)
- Cutting and realigning the metatarsal bone (osteotomy)
- Balancing the tendon and ligaments to straighten the big toe

Bunion surgery is an outpatient procedure. We will usually give you local anesthetic to numb your foot and sedation medications to help you relax during the operation. For more complex cases, we may need to use a spinal or general anesthetic.

### **Recovery after Surgery**

- After the surgery, you will need to keep weight off your big toe joint to allow it to heal. Depending on the extent of your surgery, you may or may not be allowed to weight-bear on the affected foot.
- For the first 4 weeks after surgery, you will need to keep your foot elevated most of the time and keep your activity to a minimum. After the first few weeks, you can be more active. We will give you specific and detailed instructions about this.
- Do not get your foot wet for the first 2 weeks, in order to prevent infection and protect your stitches. You will need to cover your foot with a waterproof cover during showering.
- Most of the swelling will have gone down after a few months, but it can take 6 months or longer for all the swelling to go away.

### **Risks of Surgery**

- Surgery is successful for most people. Although complications are usually rare, as with any surgery there are some risks including:
- Infection.
- A reaction to or a complication resulting from the anesthesia.
- Over- or under-correction of your big toe. This may mean that your toe points slightly outwards or inwards after surgery rather than straight ahead.
- Bone healing that takes much longer than expected.
- Bone that does not heal even after months of treatment.
- Poor position of the bone after it has healed.
- Damage to the joint, or cartilage in the joint, which may lead to osteoarthritis.
- Joint pain and stiffness.
- Pain or swelling that lasts longer than 6 months.
- Nerve damage leading to loss of sensation and toe numbness.

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- Painful and unsightly scarring.
- Damage to tendons. Until the tendons heal, it may be difficult to move the toe.
- Blood clots.