Dr. Sigle Explains Innovative New Bunion Surgery



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By John M. Sigle, DPM, FACFAS

s a licensed Nurse Practitioner in Acute Care, Susan has been working 12-hour-shifts in the ER for 25 years. This amount of time on her feet has resulted in a severe bunion. "I had my bunion for quite a while and seemed to get by with conservative treatments like shoe inserts and custom orthotics," Susan said.

As the bunion grew, so did her pain.

"I knew it was time to find a surgeon and chose Dr. Sigle because I knew he was an advanced foot and ankle surgeon. During my initial consult we talked about the options. He told me that I was a candidate for a new surgical technique that would speed up my recovery and there would be minimal scarring," Susan said.

"I was pain-free within a couple of months and able to resume my normal activities, like walking on a treadmill and doing jumping exercises. I am totally happy that I did this. My foot looks beautiful and the scarring is on the side of my foot, so it's not really visible. I can't even tell that I had surgery! Now I am thinking about doing the bunion on my other foot!" Susan said.

Susan is just one of the many patients electing to have Dr. Sigle perform this new bunion surgery.

There are probably over a hundred bunion surgery techniques. They are pretty straightforward: to relieve pain, to remove the bunion and keep it from returning, and to correct the alignment and mechanics of the foot. If done correctly, the appearance of the foot will most likely



Before

"I didn't have to use crutches or a cane. I walked out of surgery in a walking boot and was back to work within two weeks," Susan said.

The pain, she said, was minimal, but did slightly increase as the work day progressed. She modified her demanding work hours from 12 to eight-hour shifts at first, but within a couple of weeks, she had worked her way back up to the 12-hour average.



After

improve. Unfortunately, traditional practices often result in substantial pain, a long recovery time, and visible scarring. Many people are reluctant to have surgery and modify their normal routines and lifestyles to avoid surgery.

The more traditional surgical methods usually consist of an incision on the top of the big toe joint that extends toward the mid-foot. Some techniques include an additional incision between the first and second

toe on top of the foot extending to the mid-foot. Wires, screws, pins, and plates are typically used to stabilize the bones during healing. In the majority of cases, casting or boot immobilization is required along with non-load bearing crutches for six to eight weeks. Consequently, patients are inactive and not able to return to work during that time at full capacity.

Here is the good news: other, more-advanced surgical techniques that are minimally invasive are being used more often than traditional techniques. They are more effective at correcting the bunion condition, minimizing pain, enhance healing and recovery, and minimize scarring. Now, advanced foot and ankle surgeons are combining surgical techniques to achieve both functional and aesthetic results with a high degree of success.

A cosmetic approach with a smaller medial incision is made on the side of the foot that is hidden from the eye. It looks as though there's never been any surgical work done, even while wearing sandals or being barefoot. Sutures are located under the skin to eliminate scarring and detection. Sutures are dissolvable.

Precise surgical bone cuts are engineered to withstand weight bearing, to realign toes, and to maintain proper foot structure and balance. Using the Swiss Compression Technique, tiny screws are used to fixate surgical bone cuts and to stabilize the realignment. Patients are not required to be put in a cast or on crutches. The Swiss Compression Technique allows patients to become weight bearing immediately after surgery in a surgical shoe. Patients can typically drive the day after surgery.

Most bunion surgery is done under light sedation and a local anesthesia, so there is no tube and no hangover from the anesthesia. Surgery is done on an outpatient basis, and patients go home the same day.

Minimally invasive procedures also minimize edema and pain. There is less internal scarring and damage to the tissue allowing for faster recovery time. Patients are not required to be put in a cast and or on crutches. They can begin walking immediately and, in most cases, wear comfortable athletic shoes within two weeks. Most women are back in their high heels in 12 weeks.

Patients are able to return to work faster and to their normal activities within a much shorter time than traditional bunion surgeries. Now, patients can have their surgery done on a Thursday or Friday and return to work within four to five days. Although they are not able to make lengthy and demanding walks, they are able to get in and out of a car and walk to their office. They are extremely happy with the way their feet look and feel.

Patients of the Foot and Ankle Center of Illinois are also given an option to undergo MLS Laser Therapy to reduce edema and pain after surgery. Patients who elect to do this generally have faster recovery times.

If you are considering bunion surgery, select the right foot and ankle surgeon who is knowledgeable and experienced to customize a surgical plan that will result in the best outcome for you. Choose a surgeon with experience and one you can trust.

Call the Foot & Ankle Center of Illinois at 217-787-2700 to schedule a consultation. The Foot & Ankle Center of Illinois is located at 2921 Montvale Drive, Springfield, and has outreach clinics in Decatur, Taylorville, Carlinville, Shelbyville, and Sullivan, IL.

Visit www.myfootandanklecenter.com to view literature on the treatment of bunions or to view a short video clip on the new MLS Laser Therapy that is available following surgery.

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