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Do You Have Embarrassing Bunions?

WHAT IS A BUNION?

Your big toe is the hardest working toe. Every time your foot pushed off the ground, this toe supports most of your body's weight. Because the big toe is so important, any problem with it can make walking or even standing painful. A "big toe" bunion is an enlargement of the outside of the bone on the first metatarsal head. The big toe may be straight, but it is sometimes angled toward the small toe, causing irritation to the bony bump. The skin and soft tissue around the bump become red, hot, swollen, and very painful. Continued pressure over this area can lead to the development of infection or the formation of corns over the bump. The "small toe" bunion or Tailor's bunion is an enlargement of the outside of the head of the fifth metatarsal bone. The little toe is sometimes pointed in towards the big toe causing the area to become red, hot, swollen, and painful. Continued pressure on this area can also lead to the development of an ulcer, infection, or the formation of corns over the bump.

WHAT CAUSES A BUNION?

Bunions are a hereditary condition caused by incorrect foot mechanics. These incorrect foot mechanics are the result of an inherited foot type. If there is a history of bunions in the family, children may develop bunions by the age of ten or eleven! The foot may flatten too much, forcing the toe joint to move beyond normal range. In some cases, joint damage caused by rheumatoid arthritis, osteoarthritis (wear and tear arthritis), or an injury may produce a bunion. Some people are born with an extra bone near a toe joint. If you are at risk for developing a bunion, wearing high-heeled or poorly fitting shoes makes the problem worse. Shoes by themselves do not cause bunions since people who have never worn shoes have developed bunions.

There are two types of bunions: positional and structural.

Positional Bunions

This type of bunion is a flexible type of bunion caused by tight tendons. As the foot rolls over toward the big toe side as the foot is pushing off the ground, the tendon which stabilizes the big toe towards the inside of the foot is pinned against the ground. The tendons on the little toe side pull the big toe over. Thus, a bunion starts out as a muscle imbalance. As new bone grows, the joint's outer covering is stretched, pushing the big toe towards the smaller ones. Eventually, the inside tendons tighten, pulling the big toe farther out of alignment.

Structural Bunions

When the angle between the bones of the first and second toes is greater than normal, the big toe slants towards the smaller ones. In severe cases, this may cause the second and third toes to buckle. Usually, a structural bunion is more severe and cannot be manually straightened out.

Step 1: Prevention

1. If you have a history of bunions in your family, the easiest treatment is prevention. I can fit you for corrective orthotics to restore proper biomechanical foot function.

2. Make sure you wear properly fitted shoes, paying special attention to width and length. If you are an athlete, make sure you use athletic shoes with a good toe box width and depth. If you are a runner, make sure you get athletic shoes with good shock absorption. Do not wear high heeled shoes, especially when the bunion is in the acute (painful) stage, and do not wear socks or stockings that are too tight.

Step 2: Early Treatment

1. There is an exercise you can do every morning to loosen up the big toe joint. Check with me before performing these exercises. Take a one inch by eighteen inch piece of cotton material or thin rope. Tie a loop and place one end around each large toe. Keep your heels on a flat surface, pull your toes apart, and hold for five seconds. You should start by doing this pull ten times a day, and increase one time each day until you get to 25 pulls a day.

2. In addition, you can use local applications of heat (a heating pad on a low or medium heat or hot water soaks) two to three times a day. Aspirin or Motrin are useful if you do not have stomach problems, asthma, or a history of an allergic reaction to these medications. Call me at (301)695-1010 before taking these medications.

3. If you have pain after activity, you should apply an ice pack at the end of the day for five minutes on, and five minutes off over a period of 30 minutes.

4. Silicone bunion shields and a soft toe spacer between the first and second toes will help to relieve the pressure against the bunion.

Step 3: Late Treatment

To evaluate your bunion properly, I will take x-rays of your foot to show the position of your big toe joint. I will want to see how the bunion is affecting the other bones in the foot. I will also evaluate how well your big toe joint moves, and how your feet function when you walk. These tests will help me to determine if your bunion is positional or structural.

1. Shifting Soft Tissue: to realign the affected joint, any tight tendons on the inside of the big toe are released. The new bone making up the bunion is shaved away. Healing time is approximately three to four weeks in a post-operative shoe.

2. Shifting Bone: The most common bunion surgery reduces the angle between the first and second toes. The big toe bone is cut; a piece of the bone is shifted towards the other toes. Ligaments and tendons on the outside of the toe may be tightened to hold the joint properly. Usually, some type of fixation device is used to hold the bone in place. It takes eight weeks for the bone to heal. Depending on the fixation device, you can walk right after surgery.

3. Removing Bone: If you have a severe structural bunion, a piece of bone is removed further back from the big toe bone. The bone is repositioned and held in place with a pin or screw. The new bone which makes up a bunion is shaved away. You may be in a cast for up to eight weeks. With all of the bunion surgeries, your toe will be stiffer afterwards, and you will need to do stretching exercises to restore the motion of the toe.