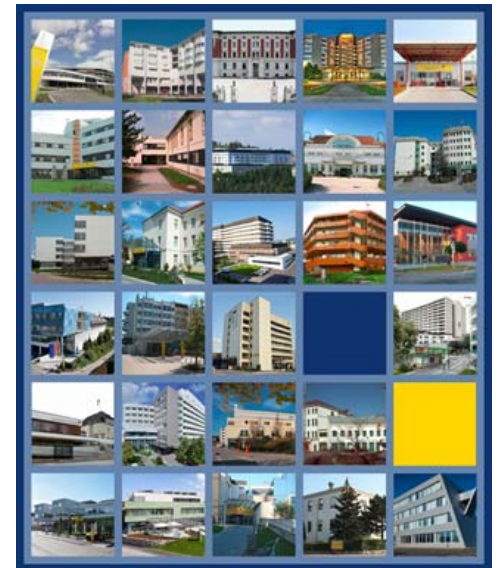


We hope to have answered all your potential questions with this information and wish you a speedy recovery.

Your treatment team

## Orthopaedics

### Discharge information



## Behaviour after treatment of the hallux valgus

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## Behaviour after treatment of the hallux valgus

### **Dear Patient,**

Further to our discussion at discharge and the doctor's letter, we would like to provide you with some more information relating to the time after your stay in our department.

Please observe the following for the most favourable treatment outcomes:

In the first two weeks after surgery, you should be careful not to put too much strain on the affected foot. During this phase, you should take short walks (5 to 10 minutes) several times each day, and otherwise primarily lay or sit down with your foot elevated. During the first two weeks, the affected leg should not be allowed to hang down for more than ten minutes each hour; this time can then rapidly be increased.

## Behaviour after treatment of the hallux valgus

Daily administration of injections under the skin is required for approx. five days to reduce the risk of thrombosis.

In principle, after 14 days the stitches are removed and the wound is completely healed. Bones require a further four to six weeks to heal.

You can also put your foot under increasing pressure; if necessary, a therapeutic shoe can be prescribed by the doctor treating you.

After correction of a slight to moderate bunion, you can expect to be able to wear trainers again after four weeks and walk in regular shoes after six to eight weeks.

## Behaviour after treatment of the hallux valgus

### **You should inform your doctor without delay if:**

- pain is still very intense on the 3rd day after surgery.
- acute pain occurs after the original pain has subsided.
- you experience a fever.
- the affected leg suddenly swells and you experience pain in the calf, which you may perceive as "sore muscles".
- the leg, foot or a toe becomes discoloured.

After six weeks, a check-up with the consultant is recommended. If there are no adverse findings, the foot may be put under increasing pressure in a normal shoe.