

Adult Acquired Flat Foot Surgery

Adult acquired flat foot is a condition of increasing symptoms and deformity (see our patient information leaflet available on website). It is however loosely classified into four stages.

Is surgery the answer for you at this point?

Depending on which stage you have, before being offered this operation, **you will need to have tried our recommended measures** such as supportive footwear, braces and supportive insoles.

If these fail to improve things you should be examined and counselled by a member of the foot and ankle team. They will help you make the decision of whether risks of surgery outweigh current and future symptoms if surgery is not done at this point.

Smoking and poorly controlled diabetes increases risks significantly and should be addressed before surgery.

What does the operation involve?

Surgery is usually performed when non-surgical measures have failed. The goal of surgery is to eliminate pain, stop progression of the deformity and improve general mobility. More than one technique may be used, and surgery tends to include one or more of the following:

- The tendon is reconstructed or replaced using another tendon in the foot or ankle. The name of the technique depends on the tendon used:
- Flexor digitorum longus (FDL) transfer
- Flexor hallucis longus (FHL) transfer
- Tibialis anterior transfer (Cobb procedure)
- Calcaneal osteotomy – the heel bone may be shifted to bring your heel back under your leg and the position fixed with a screw
- Lengthening of the Achilles tendon if it is particularly tight
- Repair one of the ligaments under your foot

Typical post-operative period

You can weight bear as tolerated straight away in the surgical shoe provided however you must keep your foot raised **above your hips** as much as possible weeks one and two.

Dressing will be taken down, sutures trimmed at two weeks

Off work for at least six weeks depending on your job

X-ray at 6 weeks to confirm the bones have healed

No driving until you can do an emergency stop - typically for eight to ten weeks

The soft tissue swelling will last for between **four and six months**.

What are the possible complications of surgery?

- Infection requiring antibiotics or further surgery

- Sensitive scars or toe numbness
- Joint stiffness
- Over-correction, under-correction or recurrence of the deformity
- Failure of bone healing (non-union)
- Clots in the leg (DVT) that can very rarely lead to fatal clots in the lungs (PE)
- Regional Pain Syndrome – whole foot swells and becomes overly sensitive