
Sesamoidectomy

Your Injury

The sesamoid is a bone under the big toe. There are two of them and they help stabilize and provide strength to the toe. Sesamoiditis is inflammation of usually just one these bones. If non-operative treatment isn't successful, you may want surgery. This consists of removal of the inflamed bone. Risks of surgery include, but are not limited to: infection, wound healing issues, scarring, swelling, stiffness, pain, numbness, injury to vessels, other deformity, need for future surgery or perhaps a condition you may feel is worse or not much better from your pre-operative status. If you need a note for work, please let us know before surgery. Most patients can drive and depending on your job, most can return to work in several days or one to two weeks in their special shoe.

Day of Surgery

You and your anesthesiologist will determine what is best for your particular surgery. Often, a block is provided by the anesthesiologist. This will decrease the amount of pain after surgery. The risks of anesthesia/block will be discussed with the anesthesiologist. You will be brought to the operating room and your leg will be cleaned for surgery. Drapes will then be placed over your leg and your entire body to keep our surgical field clean. You will be given antibiotics before/during surgery. I will perform your surgery (make an incision, perform the surgery, remove the sesamoid, close the tissue/skin and then place a special dressing on your foot that must remain on and dry until your first post-operative visit). I will discuss the surgery with your family member or guest immediately after we are done, unless you instruct me otherwise.

After Surgery

You will be taken to the recovery room and sent home when the nurses and anesthesiologist think you are suitable for discharge. You will be placed into a post-operative shoe. You are allowed to walk in this device if the tibial sesamoid is removed and allowed to only heel weightbear if it's the fibular sesamoid that was removed. You will be sent home on pain medicine with the hope that you can discontinue it as quick as possible.

Typical Post-operative Course

- **Week Two:** A member of my team or I will see you for a dressing/suture removal, X-rays and advance range of motion. Pain will be the limiting factor and you are allowed to advance based on your comfort. If the tibial sesamoid was removed, you will need to wear a toe spacer for another four weeks.
- **Weeks Six to Eight:** You will return for repeat check, but most are doing quite well at this point.
- **Months Two to Three:** You will continue to advance your activities, getting back to some sense of normal.
- **Months Four to Five:** You will begin to feel that this is "behind you" and although you are not fully normal/healed, you should be doing quite well. You will notice that your big toe is somewhat stiff and this is normal. As with any foot surgery, swelling and atrophy are the last issues to resolve and can take 6 to 12 months.

I am happy to see you at any time if questions, concerns or issues arise.
Thank you for choosing OrthoIndy. We will take excellent care of you.

Disclaimer: These are general statements and may not apply specifically to your care. I may modify as needed for your individual care.