MT Shortening Osteotomy
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The metatarsal shortening osteotomy, commonly referred to as the Weil osteotomy, is an oblique osteotomy of the distal metatarsal. This talk is intended to be a practical overview of the procedure and its use.

Goals:
1. Explain the indications and purpose of the Weil osteotomy of lesser metatarsals
2. Describe the technique of the osteotomy
3. Review the complications of the osteotomy

Indications for a Weil osteotomy:
1. Atraumatic dislocated or subluxed MTP joint
2. Relatively long metatarsal
3. Synovitis of the lesser MTP joint

Contraindications:
1. Already short metatarsal
2. Acute traumatic dislocation

Note on the Procedure
1. Osteotomy at 30 degrees relative to the metatarsal
2. Avoid a thin dorsal lip
3. Preplan the amount of shortening. (5 mm is average)
4. Use a thick or double blade
5. Do not penetrate plantar surface of MT head with screw. (Generally a 12 or 13 mm screw)
6. Internally fix with one or two screws:
7. Reef the loose side of the capsule
8. Pin the MTP joint with a axial K-wire

Complications
1. Avascular necrosis and nonunions are rare
2. Screw penetrating plantar head cause pain
3. Excessive shortening causes metatarsalgia
4. Floating toe is most common complication