Decompressive Procedure for Treatment of Moderate Hallux Rigidus: Survivorship of Youngswick Osteotomy.

A Mid Term Analysis.


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• My disclosure is in the Final AOFAS Program Book.
• I have no potential conflicts with this presentation.
Introduction

Surgical treatment of Hallux Rigidus depends on the severity of the deformity.

The ultimate goal is to correct the underlying joint degeneration, relieve pain and obtain long-term functional results.

One concern about this procedure is its survival along the years.
Purpose

Evaluate the clinical evolution and the articular damage progression in patients with Hallux Rigidus grade II and III, treated by the means of a first metatarsal decompressive osteotomy.
Methods

• Retrospective evaluation of 47 patients who underwent a Youngswick osteotomy.
• End point: progression to first metatarsophalangeal joint arthrodesis.
• Subjects underwent clinical evaluation pre and postoperatively
  • total first MTPJ range of motion.
  • AOFAS Hallux Metatarsophalangeal and Interphalangeal Score.
  • Coughlin Overall Satisfaction Scale (COSS).
Methods

• Patients with previous surgeries, rheumatoid arthritis, or post traumatic origin were excluded.

• Statistical analysis: t-Test de Student for continuous variables, Fisher exact test for categorical variables.
Results

Age: 60 y (39-84 y)     FU: 60 months (49-99m)     II: 32 p     III: 15 p

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<tr>
<th></th>
<th>Preop</th>
<th>Posop</th>
<th>p</th>
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<tbody>
<tr>
<td>VAS</td>
<td>8.9</td>
<td>2.1</td>
<td>p&lt;0.05</td>
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<tr>
<td>AOFAS</td>
<td>50.5</td>
<td>82.8</td>
<td>P&lt;0.05</td>
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<tr>
<td>ROM</td>
<td>25.4</td>
<td>30.3</td>
<td>p &gt;0.05</td>
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- Satisfacción (COSS) 97% satisfied/very satisfied.

- Complications:
  - 1 superficial wound infection.
  - 4 patients with metatarsal pain.
Results

- Shortening 2.9 mm (sd=0.3)
- 18 patients (38%) presented signs of advanced articular degeneration at final follow up.
- No first MTPJ arthrodesis were performed at final follow up.
Evidence

- 26 patients (33 feet) HR grade II and III.
- FU 34 m.
- 90 degree osteotomy.
- ROM from 33.3 to 72.1 (p<0.001)
- AOFAS from 48 to 78.1 (p<0.001)
- 15% (4 patients) metatarsal pain
### Discusión

<table>
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<th></th>
<th>n</th>
<th>Grade</th>
<th>FU (months)</th>
<th>ROM</th>
<th>AOFAS</th>
<th>Artrodesis</th>
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<tr>
<td>Derner et al</td>
<td>59</td>
<td>II - III</td>
<td>23</td>
<td>36 - 42 (p&lt;0.001)</td>
<td>42 - 88 (p&lt;0.001)</td>
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<td>Kilmartin E</td>
<td>26</td>
<td>II</td>
<td>34</td>
<td>33.3 - 72.1 (p&lt;0.001)</td>
<td>48.1 - 78.1 (p&lt;0.001)</td>
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<td>II - III</td>
<td>60</td>
<td>25.4 - 30.3 (p&gt;0.05)</td>
<td>50.5 - 82.8 (p&lt;0.05)</td>
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Conclusion

• Good clinical results.

• Low index of complications.

• No progression to first MTPJ fusion in the mid-term.

• Best results are related with younger ages and wider ROM.

• First report of mid-term results.
References


