5TH METATARSAL FRACTURE FIXATION SURGERY

SURGERY INFORMATION



- 0493 461 133
- (08) 9118 3112
- HealthLink:drcgraff
- admin@christygraff.com
- www.drchristygraff.com

THE SURGERY

- Most 5th metatarsal fractures can be fixed with a screw placed inside of the metatarsal, using a small incision.
- Other fractures need a bigger incision to fix with a plate and screws or align the bones
- In chronic non healing fractures, bone graft is sometimes required to help with healing
- Other surgeries are sometimes required to change the biomechanics of the foot (see Cavovarus Foot Surgery).
- Xrays are used in theatre to make sure the bones are aligned correctly, and there may be a tourniquet placed around the thigh to help limit bleeding





THE HOSPITAL STAY

- You will wake up with a moonboot or a cast
- Your foot should be elevated
- You will either need blood thinning medications and vitamin C daily for 6 weeks
- You will stay in hospital for 1 day; you may be able to go home the same day
- You will be only allowed to touch your foot to the ground for 6 weeks
- Depending on your balance and strength, you may need rehabilitation post operatively
- Buying a second hand **knee scooter** pre operatively (can search online) and practicing at home before the surgery, can be helpful; please bring it into the hospital with you. It is easier to use a knee scooter than crutches

WHEN YOU GO HOME

- You will need **medications** for pain relief; regular paracetamol (2 tablets four times a day) is recommended, as well as strong pain killers, especially at night before bed. These can have side effects of drowsiness, nausea and constipation, and other tablets to help with these side effects may be required.
- You will need blood thinners to prevent blood clots and vitamin C 1g daily for 6 weeks
- You will need a shower chair and bags to keep the moonboot dry for the first 2-3 weeks
- You will need to attend your post op appointment in 2-3 weeks where the wounds will be checked
- After this you will be able to shower with a shower chair out of the boot

REHABILITATION

All patients are different. These timelines are only a guide, and some patients may progress faster or slower than others.

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0-3 weeks	 You will be in a moonboot for 2-3 weeks; please treat this like a plaster and do not remove it You will only be allowed to touch your foot to the ground for balance. Please keep your foot elevated and out of bed for toilet only You will need to bag the leg for showers Pain relief: Please take regular paracetamol with meals and before bed; stronger pain killers are often needed, especially before bed Please take blood thinners and vitamin and C as prescribed
2-3 weeks	 Post op appointment for a wound review and an xray You can then take the foot out of the boot for showers and bed Commence static strengthening and range of motion exercises with physio, Commence seated showering
6 weeks	Commence prorgressive weightbearing in a boot over 6 weeks depending on xrays, starting with crutches
3 months	 Commence weight bearing without the boot and increased strengthening You can wear normal shoes if you can fit into them (supportive sneakers are best) Commence swimming and cycling, and increase sports specific training

6-12 months

 Sometimes the metalwork can irritate people, and can be removed as a day case procedure once the fracture has healed

WHEN CAN I DRIVE?

- Left foot 3 weeks (if driving an automatic car)
- Right foot 6-8 weeks

WHEN CAN I RETURN TO WORK?

- Seated work at 2-3 months
- Prolonged standing 3-6 months
- Heavy labour work 6-12 months

WHAT CAN GO WRONG?

- Anaesthetic problems
- Wound/scar problems
- Nerve/vessel/tendon injury
- Blood clots
- Infection
- Stiffness
- The fracture does not heal (non union)
- The fracture heals in the wrong position (malunion)
- Ongoing pain/swelling
- Chronic Regional Pain Syndrome
- The need for further surgery

CONTACT

If you want more information, or have any questions or problems, please contact Dr Graff on admin@christygraff.com or please call the rooms on 0493 461 133