Joint-Preserving Procedure for Moderate Hallux Rigidus

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INTRODUCTION

Hallux rigidus is a condition characterized by pain and restriction in motion of the first metatarsophalangeal (MTP) joint, especially in dorsiflexion.\textsuperscript{1} Symptoms commonly associated with degenerative arthritis of the first MTP joint were initially reported by Davies-Colley\textsuperscript{2} in 1887, although Cotterill\textsuperscript{3} is credited with proposing the term hallux rigidus. According to the etiology, hallux rigidus can be classified as primary (hallux limitus) or secondary.

Surgical treatment depends on the etiology and severity of the deformity. Operative procedures are divided into joint-preserving techniques (cheilectomy, phalanx, and first metatarsal osteotomies) and joint-sacrificing techniques (arthrodesis, arthroplasty). The ultimate goal of the treatment is to correct the underlying deformity, relieve pain, obtain long-term functional results, and have the shortest period of rehabilitation.

This article presents a review of the literature and analyzes biomechanical aspects of hallux rigidus, its classification, and etiology, and discusses the available treatment options in the literature along with the authors’ preferred approach.

KEYWORDS

- Hallux rigidus
- Joint preservation
- Degenerative arthritis
- Hallux limitus

KEY POINTS

- Hallux rigidus is a condition characterized by pain and restriction in motion of the first metatarsophalangeal joint, especially in dorsiflexion.\textsuperscript{1}
- The ultimate goal of the treatment is to correct the underlying deformity, relieve pain, obtain long-term functional results, and have the shortest period of rehabilitation.
- When pain is present both in maximum dorsiflexion and in mid range of motion, which is the most common scenario, the main choice is to perform a decompressive osteotomy.

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