# Weightbearing after 1st MPJ Arthrodesis and Lapidus Thomas A. Fusco DPM, FACFAS **ORTHOPAEDIC ASSOCIATES** The Strength of Experience Science & Management Symposium Financial Disclosure • Speaker for Mimedx • No financial disclosures relevant to this presentation. ORTHOPAEDIC ASSOCIATES The Strength of Experience Why Should We Care About NWB vs WB??? • Prolonged NWB increases risk for VTE • Less risk for falls

ORTHOPAEDIC ASSOCIATES

The Strength of Experience

• Psychologic effects

• Improved ability to perform ADL's

• Other orthopedic comorbidities

Common Pathology leading to 1 <sup>st</sup> TMT Arthrodesis	
• Instability	
Hallux valgus     Hallux limitus	
• Deformity	
Arthritis (OA, post-traumatic, systemic, etc)	
• Flatfoot	
• ORTHOPAEDIC	
As Screen of Exprises	
, The second and the second	
Sugical Approaches to 1st TMT Arthrodesis	
• Incision: • Dorsal	
Medial     Dorsal medial	
Plantar medial     Joint preparation:	
Currette     Bur     Reproduce	
Rongeur     Planal resection     Osteotome	
"flose pedal" or "Fish scale"     Fenestration with wire/dirill     Templated cutting guides	
ASSOCIATES	
The Strength of Experience	
Surgical tips: 1 <sup>st</sup> TMT Arthrodesis	
Pin distractor (Hintermann)	
<ul> <li>Use the dorsal lip of the cuneiform as bone void filler/graft.</li> </ul>	
<ul> <li>Dorsiflex and rotate the hallux at the MPJ.</li> <li>Pointed large bone reduction clamp at the 1<sup>st</sup> metatarsal head to the</li> </ul>	
2 <sup>nd</sup> metatarsal head.	
ORTHOPAEDIC ASSOCIATES  The Strength of Experience	



Does the Evidence Support Early WB After 1<sup>st</sup> TMT Arthrodesis???



Union Rates in 1st TMTJ Arthrodes	sis with
Crossed Screws <sup>8</sup>	

- Crossed, solid screw fixation.
- Partial WB at 12.2 days
- Full WB at 34.4 days
- Average time to radiographic union was 65 days.
- 3 total Nonunions (2.2%)
- 1 Symptomatic

JFAS 2015 Jan-Feb 2015, Vol 54, Issue 1. 69-75. King et al. Modified Lapidus Arthrodesis With Crossed Screw Fixation: Early Weightbearing in 136 Patients.



#### Union Rates 1<sup>st</sup> TMTJ Arthrodesis<sup>5</sup>

- Does early weightbearing change union rates?
- Early weightbearing is defined as full weightbearing at less than 21 days post-operative.
- 367 Consecutive patients

  - 24 total non-unions, 6.5% overall
     13 (7.1%) in the early weightbearing group
     11 (6%) in the delayed weightbearing group
     Median time to WB in the union group, 22 days.

AS March 2016, Vol 55 , Issue 2 , 226 – 229. Prissel et al. A Multicenter, Retros udy of Early Weightbearing for Modified Lapidus Arthrodesis



#### Early WB with Lapidus<sup>13</sup>

- 80 Pts undergoing a Lapidus
- Protected WB starting at 2 weeks post-op
- 2 or 3 screw construction
- Either calcaneal bone graft or dorsal redundant medial cuneiform used as graft to the dorsal aspect of the arthrodesis site.

JFAS 2010 July-Aug. Vol 49, Issue 4, 357-362. Blitz et al. Early Weight Bearing After Modified Lapidus Arthrodesis: A Multicenter Review of 80 Cases





#### My Personal Protocol and Results

- WBAT with tall CAM boot for additional 3 weeks



*	ORTHOPAEDIC ASSOCIATES
-	The Strength of Experience

#### Points to Remember

- Review of literature supports NWB for 2-3 weeks post-op
- Begin WB with CAM boot at 2-3 weeks with little to no effect on union rates or loss of reduction of IM 1-2.
- No general consensus on fixation.







#### Common Pathology Leading to 1st MPJ Arthrodesis

- Hallux rigidus
- Hallux varus
- Failed implant



#### Surgical Approaches to 1st MPJ Arthrodesis

- Dorsal medial
  Joint preparation:
  Currette
  Rongeur
  Bur
  Osteotome
  Planal resection
  Reamers
  Fenstration with drill/wire
  "fish scaling" or "Rose pedaling"



#### Joint Preparation, First MPJ<sup>4</sup>

- 200 First MPJ arthrodesis with overall union rate of 93.5%
- 95% Ball and socket

  - Rongeur only 100%
    Rongeur and burr 96.3%
    Not statistically significant
- Union rate is not influenced by preparation technique

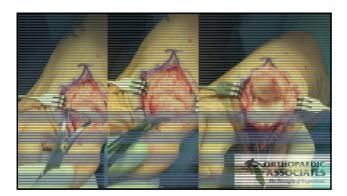
Mahadevan, D. et al. JFAS June 2015, Vol 21, Issue 2, 103 – 107. First metatorsophalangeal Joint arthrodesis – Do Joint configuration and preparation technique matter?

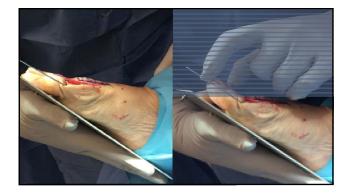


#### Surgical tips: 1<sup>st</sup> MPJ Arthrodeis

- Penetrating towel clamp to the proximal phalanx for visualization of the joint.
- Lid to simulate the weightbearing surface.
- Save large osteophytes to debride and use as bone void filler/graft.







### Hardware: 1st MPJ Arthrodesis

- K-wires
- Lag/compression screw
- Dorsal plate
- Locking plate
- Combination
- External fixation





#### IMA 1-2 Reduction<sup>3</sup>

- 2014 Systematic review, 701 procedures included
- Starting IMA of less than 15 reduced by 3.7
- Starting IMA of greater than 15 reduced by 5.42

JFAS Sept-Oct 2014, Vol 53, Isssue 5, 620-623. Dayton et al. Reduction of the Intermetatorsal Angle after First Metatorsal Phalangeal Joint Astronasis:



#### Nonunion Rates of 1st MPJ Arthrodesis<sup>7</sup>

- Systematic review
   37 studies. 2656 arthrodesis included.
   Compression screws/Dorsal plate and screws/Staples
- Hallux rigidus 32%
- Revision surgery 9.3%



Total nonunion rate of 5.4%
Symptomatic nonunion 1.8% over
AS 2011 Nov-Dec;50(6):710-3. Roukis. Nonunion after arthrodesis of the first netatorsol-phalangeal joint: a systematic review

#### Union Rates 1<sup>st</sup> MPJ Arthrodesis<sup>2</sup>

#### Dorsal Non-Locking Plate (n=18) Dorsal NLP with Lag Screw(n=30)

- Union <60 days = 55.6%
- Union <60 days = 83.3%
- Fusion rate total = 77.8%
- Fusion rate total = 100%

Open Orthop J. 2015; 9: 480–482. Rashid et al. First Metatarsalphalangeal Joint Arthrodesis: A Retrospective Comparison of Two Methods of Fixation



#### Does Pathology Effect Union rates<sup>6</sup>

- Single surgeon study looking at 134 consecutive 1st MPJ arthrodesis.
  Overall union rate of 91.8%
  Crossed screws (124) or dorsal plate (10)

- Hallux rigidus 49 joints (34%)
   Inflammatory arthropathy 34 joints (25.4%)
   Salvage surgery 5 joints (3.7%)
   Hallux valeus group had a 14.3% p.



# Fusion Rates With Early WB

- Lag screw or K-wire with 2 hole plate dorsally
- Full WB by 2 weeks for all patients

JFAS 2013 July-Aug. Vol 52, Issue 4, 460-464. Mann et al. Low-profile Titanium Plate Construct for Early Weightbearing with First Metatarsophalangeal Joint Arthrodesis



### Does Construct Effect Fusion Rates<sup>10</sup> | Static Plate | Static Plate + Lag | Plate (n = | Locked Plate + Lag | p | (n = 45) | Screw (n = 14) | Screw (n = 45) | Value 56 0 ± 9 21 (40, 78) 57 1 ± 13.97 (27, 82) 57.3 ± 7.81 (38, 72) 58.1 ± 10.06 (29, 80) .92 (40, 78) 41 (95.35) 12 (85.71) 33 (91.67) 43 (95.56) .7 50 ± 56 (13 56 ± 18 (31 to 92) 66 ± 67 (17 to 63 ± 22 (29 to 116) to 320) Days to full $54 \pm 18$ (30 $55 \pm 13$ (37 to 85) $59 \pm 16$ (37 to $63.45 \pm 19.67$ (30 to .086 weight-bearing to 128) 103) 116) 12.25 ± 15.1 12.2 ± 13.6 (1.8 to 9.82 ± 8.43 4.59 ± 4.44 (0.65 to (0.7 to 61) 36.5) (1.5 to 12.9) 5.91) JFAS 2012 May-June. Vol 51, Issue 3, 285-287. Hyer et al. A Retrospective Comparison of Four Plate Constructs for First Metatarsopholangeal Joint Fusion: Static Plate, Static Plate with Log Screw, Locked Plate, and Locked Plate with Log Screw ORTHOPAEDIC ASSOCIATES The Strength of Experience

#### Fusion Rates With Immediate WB<sup>12</sup>

- 37 Fusions with immediate weightbearing post-op
- Mean time to fusion 69 days
- Combination of crossed screws or plate and screws

Foot & Ankle Spec. Feb 2008; 1(1):24-8. Berlet et al. A retrospective review of immediate weightbearing after first metatarsalphalangeal joint arthrodesis.



#### My Personal Protocol and Results

- WBAT immediately post-op
   Crutches/Scooter Rx'ed for patient comfort if needed
- WBAT with tall CAM boot for 6 weeks
- WBAT with tennis shoes at 6 weeks post-op
- Activities as tolerated at 12 weeks post-op

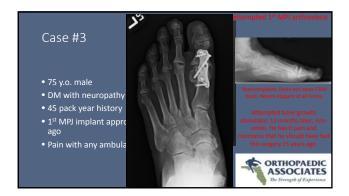


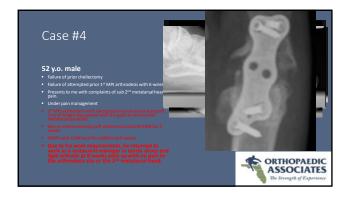
#### Case #1

- DM, HTN
- Hallux rigidus, 2<sup>nd</sup> MPJ instability, 2<sup>nd</sup> Hammertoe
- Surgical plan: 1<sup>st</sup> MPJ arthrodesis, 2<sup>nd</sup> Metatarsal osteotomy, 2<sup>nd</sup> PIPJ arthroplasty
- Immediate WB post-op with tall CAM boot
  - K-wire to the 2<sup>nd</sup> ray removed 6 weeks post-op when patient transitioned into tennis shoes.









#### Case #5

- On chronic prednisone and methotrexate. All DMARDs have caused her severe side effects and been discontinued
   NWB for 1 week post-op



#### Case #6

- Active tennis player
- NWB for 3 weeks, Full WB in CAM boot for additional 3 weeks.





## Thank you!



References			
Neierences			
<ul> <li>1. FAI 2003 Agr 2-8(4):332-7. Politi et al. First metatorius phologogial joint arthrodenic a biomechanical aureument of stability.</li> </ul>			
2 Gen Orthos J. 2015: 9: 480–482. Rathid et al. First Metatarsolohalanaral Joint Arthrodesis: A Retroporcher Companion of Two Methods of Floation			
	ith Log Screw, Locked Plate, and	3	
<b>.</b>			
	ORTHOPAEDIC ASSOCIATES The Strength of Experience		