

TOENAIL OPERATION - INGROWN TOENAIL

Dr Matley & Partners: Patient Information

BRIEF DESCRIPTION

A toenail can become very thick, curved and painful or the nail curls over and grows into the toe, most commonly affecting the big toe but it may happen with other toes as well. Surgical treatment involves either a wedge excision where a part of the nail is removed or it can involve removing the whole nail. You may decide to allow the nail to grow back afterwards but in some cases it is necessary to also remove the growth plate to prevent the nail growing back.

WHY IS THIS OPERATION NECESSARY?

An ingrown nail can cause infection and painful swelling with granulation tissue. It may prevent you from wearing shoes or even make it difficult to walk.

ARE THERE ALTERNATIVE TREATMENTS AVAILABLE?

Using ointments or antibiotics is mostly unsuccessful. Cutting a wedge into the nail or clipping away the corners yourself could be dangerous. It is common to have repeated episodes of infection that could become chronic. Your surgeon will discuss with you the advantages and disadvantages of the surgical options.

IS IT SAFE TO HAVE THIS OPERATION?

Before you agree to the operation, you should consider the risks that may be involved. Your surgery will be performed by a team of highly qualified and skilled professionals who will take all steps necessary to ensure a safe procedure and a successful result. However there are risks involved with all surgery even if these risks may be small.

WHAT ARE THE GENERAL RISKS INVOLVED?

There are risks for developing complications which are general and which may occur with any surgical procedure. These complications include the risk of infection, bleeding, pain, wound breakdown, deep vein thrombosis, or complications affecting the heart, lungs or kidneys.

WHAT ARE THE SPECIFIC RISKS INVOLVED?

This is generally considered a minor procedure with minimal risk. If a wedge excision is done or the nail simply removed, it can be done under local anaesthetic in the doctor's office. The main concern is that the nail will grow back in exactly the same way and cause the same problem again. In such a case a radical excision would be better with ablation of the nail bed so that a part (or all of the nail) does not grow back again. This may need a general anaesthetic in the operating theatre. Bleeding in the first 12 hours may be troublesome. Pain that is bad enough to keep you awake means you should contact the surgeon.

WHAT ARE THE ANAESTHETIC RISKS INVOLVED?

You can discuss the type of anaesthetic you will have with your anaesthetist and also the possible complications that may occur.

WHAT SHOULD I DO BEFORE THE OPERATION?

If the procedure is done under local anaesthetic you do not need any specific preparation. For a general anaesthetic you should not eat or drink anything for at least six hours before your operation. However, you should take all your regular medication as usual on the day. Your

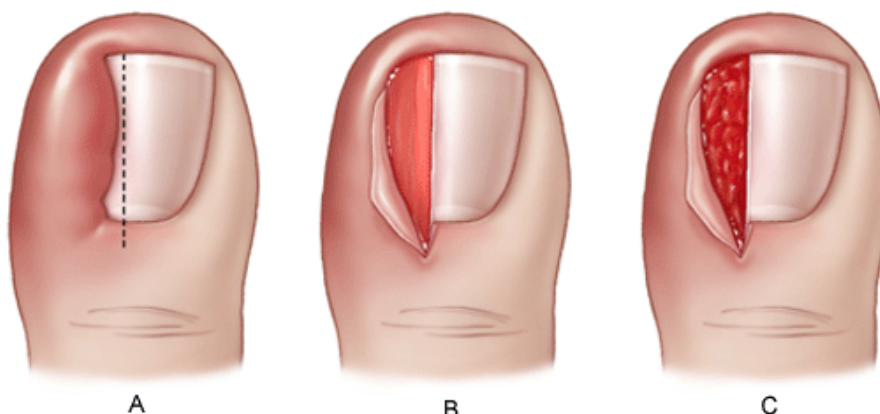


Figure 3: A: Infected toenail; B: Toenail partially removed; C: Toenail surgery



These notes give an overall guide to your procedure. You may see some differences in the details of your treatment, since it is tailored to suit your own condition.

surgeon may want you to stop certain medication such as disprin, warfarin, or other blood thinning medicines before the operation.

WHAT HAPPENS BEFORE THE OPERATION?

Please report to the hospital reception on time for your admission. Please bring along all the documents that may be required such as your medical aid card, ID and contact details. If you are not a member of a medical aid you will be required to pay a deposit or to sign an indemnity form. As far as possible we will try to advise you about hospital costs before your admission. It may be best to complete some of the documentation beforehand at the hospital pre-admission clinic to save time on the day of your admission.

When you arrive in the ward, you will be welcomed by the nurses or the receptionist and will have your details checked. Some basic tests will be done such as pulse, temperature, blood pressure and urine examination. You will be asked to hand in any medicines or drugs you may be taking, so that your drug treatment in hospital will be correct. Please tell the nurses of any allergies to drugs or dressings. The surgeon will have explained the operation and you will be asked to sign your consent for the operation. If you are not clear about any part of the operation, ask for more details from the surgeon or from the nurses.

In an adult the operation area may need to be shaved to remove excess hair. You may be issued with compression stockings that will help prevent blood clots in your legs. If you are having a general anaesthetic, the anaesthetist who will be giving your anaesthetic will interview and examine you and he may put up a drip or prescribe some medication to help you relax.

You will be taken on a trolley to the operating suite by the staff. You will be wearing a cotton gown, wedding rings will be fastened with tape and removable dentures will be left on the ward. There will be several checks on your details on the way to the operating theatre where your anaesthetic will begin.

HOW LONG DOES THE OPERATION TAKE?

Usually about 15 minutes

WHAT HAPPENS WHEN I WAKE UP?

After the operation is completed you will be transferred back to the ward. Although you will be conscious a minute or two after the operation ends, you are unlikely to remember anything until you are back in your bed on the ward.

WILL I HAVE PAIN?

Local anaesthetic will be injected in the toe and you should have no pain immediately afterwards. When the injection wears off some pain may be present, but this should be controlled to a level of mild discomfort with the painkillers that are prescribed. Ask the nursing staff for medication if you have pain. The wound is tender and delicate for a week or so after the dressings are taken off. This rapidly gets better.

HOW SOON AFTER THE OPERATION CAN I EAT?

You can eat normally immediately after the operation.

HOW SOON AFTER THE OPERATION CAN I GET OUT OF BED?

You could start walking immediately.

HOW LONG WILL I STAY IN THE HOSPITAL?

You will go home the same day.

WHAT HAPPENS WHEN I AM DISCHARGED FROM THE WARD?

Your surgeon will determine when you are ready to go home. You will be given some medication for pain and you may also need to take antibiotics for a few days after you go home. You will be given instructions on the dressings and how to care for the wound. You will also get an appointment for your follow-up in the surgeon's rooms. You should ask for a sick certificate if you need this for your employer.

WHAT SHOULD I BE AWARE OF WHEN I GET HOME?

You should leave the dressing on for at least two days before removing it. You could then wash, bath or shower as usual to clean the toe and then cover it again with a dry dressing. For the first week you should wear slip-on shoes or sandals that are not too tight.

HOW SOON CAN I START EXERCISE?

You can perform routine activities as soon as you get home. Walking a long distance would be difficult, and strenuous exercise should be avoided.

HOW SOON CAN I DRIVE A CAR?

You can drive straight away if you can drive safely. After a general anaesthetic you must not drive for 24 hours

HOW LONG WILL I BE OFF WORK?

Usually between two and three days

WHAT ABOUT PAYMENT?

The procedure and its associated costs will have been discussed with you, and a quote provided. Where procedures need to be unexpectedly altered during the course of the procedure, the fee may change. Similarly, emergency procedures may incur an additional cost.

Surgeons are highly trained, highly skilled professionals and throughout your care a member of the practice is available to attend to you 24 hours a day. In return we expect prompt payment of your account.

We do not submit accounts to medical aids.



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