

Clinical case of surgical treatment of patient with rheumatoid forefoot deformity

Introduction

Diagnosis

Right forefoot deformity: hallux valgus, fixed 2nd and 3rd hammer-toes. 1MTP joint arthritis of III stage. Rheumatoid seropositive erosive arthritis, low activity.

Anamnesis morbid

patient suffers from rheumatoid arthritis from 2013. After the beginning of the disease patient noted the progressive forefoot deformity. During last 2 years the big soft tissue formation appeared near the medial side of the 1 MTP joint of the right foot. In 2018 the patient was consulted in VA Nasonova Institute of Rheumatology, the surgical treatment was recommended.

Rheumatoid arthritis therapy

Methotrexate 10 mg per week, effective.

Operation

Removal of the soft tissue formation, 1 MTP joint arthrodesis, resection of the 2nd and 3rd toes bocks of the right foot.

During the palpation there were the signs of fluid inside the formation. After the triple processing of the operation field with an antiseptic, a puncture of the subcutaneous soft tissue formation was performed, a viscous liquid of yellow color was evacuated, the material was taken for cytological examination. On the medial side in the area of 1 MTP joint the lens-shaped incision of 8 cm in length was performed. A voluminous soft tissue formation with small yellow inclusions, welded to the capsule and occupying the joint space, was

visualized, removed and taken for histological examination. Proximal phalanx of the first toe was in a subluxation, joint cartilage was absent. The articular ends were processed with the help of the oscillator saw. The arthrodesis was fixed in the correct position using 3 K-wires due to the low density of the bone tissue and the presence of the bone cysts. After that the resection of the 2nd and 3rd toes bocks was performed, and toes were fixed with K-wires.

Post-operative management

antibiotics during 5 days after the operation; pain management (Ketoprophenum + Promedolum –2 days, then – non-steroidal anti-inflammatory drugs–on demand); removal of K-wires from 2nd and 3rd toes – 3 weeks after the operation; from 1st toe –8 weeks after the operation; wearing the Barook shoes until the removal of all K-wires, then – using the individual insoles (Figure 1).



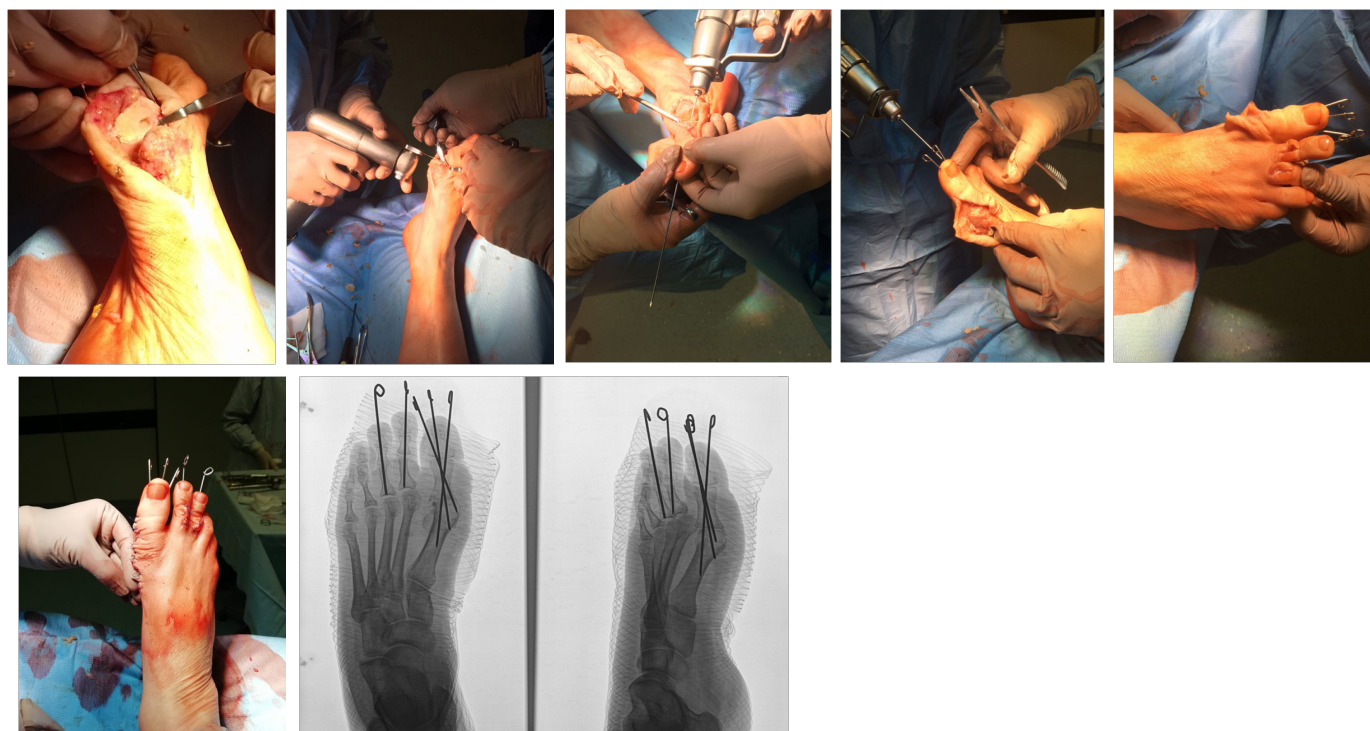


Figure 1 The cytological and histological examinations showed the signs of inflammatory process due to rheumatoid arthritis.

Funding

There is no funding source.

Acknowledgements

None.

Informed consent

Informed consent was obtained.

Conflict of interest

The authors declare that they have no conflict of interest.