

Cheilectomy for Hallux Rigidus Repair

Mr Pillai, Consultant Orthopaedic Surgeon, recommends the use of the geko™ device following Cheilectomy for Hallux Rigidus to reduce post-operative swelling.

Clinical Presentation

Arthritis at the base of the big toe is known as hallux rigidus. It commonly affects active and sporty people as a result of repeated trauma. It presents as a bump on the top of the big toe and causes pain and stiffness in the joint. This is especially noticeable on the upward bending caused by walking or running. When selecting Cheilectomy as chosen option for surgical repair, I would use the geko™ device to reduce the post-operative swelling.

Cheilectomy Procedure

One-hour post-surgery, whilst the patient is in the recovery room, I apply the geko™ device to the operated limb. Following the manufacturers IFU, I look for a minor visible movement of the muscles in the lower leg, moving the foot slightly outwards and upwards.

When the patient is ready to go home, they are trained to self-apply the geko™ and provided with sufficient devices for up to 7 days stimulation, and a protocol reducing wear time to just 6 hours per day. In my experience the patients have been happy to self-apply at home and have reported a quality experience.

Clinical Outcomes

Patient observations since using the geko™ device:

- Reduction in oedema / post-operative swelling
- No pain reported during use



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- Earlier mobility with active range of movement

Image from the patient Case Study¹



Picture 1 - day ten post-op

Clinical Endorsement

I offer the gekoTM device to my patients, it's the latest innovation for the prevention of swelling following Cheilectomy, to enhance DVT prophylaxis² and for overall quality of patient recovery.

Case study references

1. Pillai A, Pickford N, Wainwright T, using the gekoTM device to prevent oedema and promote functional activity following foot surgery, case study 4 on file, Firstkind Limited, 2014.
2. NICE medical technologies guidance (MTG19). Published date: June 20 2014
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