

## 1. What is a corn?

“Corns” is also known as “heloma” in medical term which describes thick areas of skin that develops as a result of excessive amount of pressure and friction being applied to the skin. Corns, rather than being a defect, are our body’s protective mechanism from further damage. There are types of corn that develop; hard corns known as heloma durum and soft corns known as heloma molle.



## 2. What causes corns?

Corns can be caused by a number of reasons;

- Enlarged joint
- Wearing tight/pointed shoes
- Adductovarus deformity: is a crooked toe that moves under the adjacent toe

## 3. What are the symptoms of corns?

- Pain: skin in-between the toes is relatively thin and sensitive, corns that develop there have the potential to cause significant discomfort
- Ulceration with/without infection: interdigital skin is delicate therefore it is not uncommon for corns to exhibit necrotic breakdown/ulceration in the layers below the corn, and on occasions an infection may develop thus magnifying the level of discomfort.

## 4. How is it treated?

Corns can be treated with non-operational or operational treatments

- **Non-operational treatments**: aims to reduce excessive pressure.
  - Regular podiatry visit: Podiatrists can reduce the painful corn by debridement and manufacture custom-made toe separator to reduce excessive pressure
  - Avoid wearing tight/pointed shoes
    - ❖ Do not use a corn pad as it contains salicylic-acids and when applied improperly, these corn pads can create a chemical burn in healthy tissue that may result in infections and ulcers.
- **Operational**: Surgery aims to remove the enlarged joint(arthroplasty)

## 5. Can this problem become worse?

This problem tends to progress, usually slowly with the enlarged joint becoming more prominent and uncomfortable.

## **6. What does the surgery involve?**

Surgery for painful interdigital corn is relatively quick and easy surgery. It usually involves

- Small incision(around 2 cm) over the toe
- Removal of condyle (head part of phalanx)
- Repair of tendon, capsule and skin closure
- If there is a tight tendon or contracted skin, tenotomy or lengthening of tendon or skin plasty are performed to address these problems

## **7. Recovery in the first few weeks after surgery**

- Elevate your foot as often and as much as possible to reduce swelling
- Avoid smoking
- Take pain medication as instructed
- Some blood ooze can be expected in the bandage, but if worried, contact the number given

## **8. Post-operative clinic schedule**

- 1<sup>st</sup> week – wound check and dressing change
- 2<sup>nd</sup> week - wound check and suture removal
- 4<sup>th</sup> week – clinical check-up
- 12<sup>th</sup> week – Clinical examination

## **9. When can I walk?**

- 0-2 weeks: Full weight bearing in postoperative surgical shoe
- >2 weeks: Full weight bearing in soft comfortable shoes

## **10. Can I get my foot wet in shower?**

In the first 2 weeks, keep the foot dry. You may shower with a waterproof cover over your foot.

## **11. How can I look after the incision wound?**

Do not pull at scabs but let them fall away naturally. If your wound becomes red, swollen or sore, you need to see your surgeon.

## **12. When can I start to drive?**

Do not drive until you are confident about controlling your vehicle and always check with your doctor and insurance company. Generally it will take around 3-4 weeks.

## **13. When can I work again?**

- Sedentary jobs: 3-5 days
- More active employment: 3 weeks

#### 14. What long-term outcome can I expect after surgery?

Excellent pain reduction is expected once scar is healed which usually takes 6 weeks.

The swelling often take up to six months to go down completely. You should always wear comfortable shoes that have enough space for your toes. Wearing shoes with high heels or pointed toes may cause more toe problems in the future.

#### 15. What can go wrong with painful corn surgery?

As with any other surgical procedures, bunion surgery is not without complications. The complications fall into three categories.

- Complications of anaesthetics
- General complications of any operations
- Specific complications of bunion operation

##### 1) Complications of anaesthetics

Anaesthetist will discuss with you the possible complications from having anaesthetics.

##### 2) General complications of any surgery

Pain: Your surgeon will give you pain medication.

Bleeding: surgery is usually done under ankle tourniquet to minimise bleeding during procedure.

Infection: soft tissue infection could happen after the operation and it is usually managed well with oral antibiotics.

There is a slim risk that bone infection (Osteomyelitis) could happen and this usually requires intravenous antibiotics for a period of time.

Surgical site scarring: If you are prone to hypertrophic scar (Keloid), doctor can arrange scar reduction cream during the operation.

Blood clot (Deep Vein Thrombosis) in the leg: This could happen 1 in 100 but your surgeon can assess you for risk factors such as blood disorder, previous history, smoking, edema of the legs

##### 3) Specific complications of arthroplasty

**Nerve Damage:** You could experience numbness near the operation site but this usually resolves with time.