

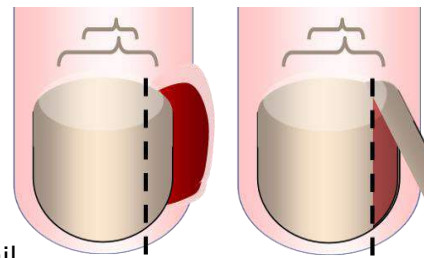


Suffolk Podiatry About Your Nail Surgery

The Procedure:

You have been referred to the nail surgery team because you have a nail condition which may be best treated by removing all or part of the affected toenail. Removal of part of the toenail is known as "Partial Nail Avulsion" and removal of the entire toenail is known as "Total Nail Avulsion". Both procedures are very minor and only take 30-60 minutes, after which you will be able to go home. Both Partial and Total nail avulsion procedures follow the same process:

- 1) Although only minor, this is a surgical procedure and before proceeding you must sign a consent form.
- 2) The toe will be injected with local anaesthetic to make it numb and a band will be put round the toe to reduce bleeding.
- 3) The whole nail or part of the nail will be removed as required (the illustration here shows a partial nail avulsion).
- 4) The bed from which the nail grows will be treated to help prevent the nail from growing back and causing further problems.
- 5) A large dressing will be applied, and once the podiatrist has checked that you are well, you will be allowed to go home to rest.



Possible risks or complications of Nail Surgery:

Nail surgery has a very good success rate. However, there are some risks associated with the procedure:

- There is a small chance of nail re-growth (approximately 5%), but experience shows that if this occurs it normally causes no symptoms.
- Damage/thickening to any remaining nail (where applicable).
- Post-operative infection of the area.
- Sensations of "pins and needles" in the area treated.
- Delayed healing time.
- On very rare occasions people can have an allergic reaction to local anaesthetic. These reactions can range from mild to severe. Your podiatry team are trained to look after you in the unlikely event that this happens and will ensure that you get the care you need.

Before your Nail Surgery appointment:

If your toe is inflamed or infected, you should soak your foot for 10 minutes every day in salty water until your nail surgery appointment (add enough table salt to ensure some remains undissolved). Only high-risk patients or patients with an infection spreading into the foot should seek antibiotics from their doctor.

- Unlike general anaesthetics, having a local anaesthetic means you may eat and drink normally before your surgery. Please do not consume alcohol or recreational drugs on the day of your nail surgery appointment.

- Certain medications may need to be adjusted or monitored before your surgery appointment. In these cases, the nail surgery team will discuss this with you before the day of your surgery.
- Please let the Podiatrist know if you have any other operations pending or have a dental appointment booked within 24 hours of your nail surgery appointment.
- A parent or legal guardian must accompany anyone under 16 years of age.
- Due to the local anaesthetic, you must not drive or operate machinery for 24hrs.
- You are advised to bring a large open-toed shoe/sandal to accommodate the dressing(s).
- Ensure nail varnish is removed prior to your appointment. The feet should be washed and clean when you attend.

After your surgery:

- Following nail surgery, we advise you to arrange to take the next two days off school or work and to rest with the foot elevated. This will reduce swelling and help the toe(s) to heal.
- We do not advise surgery taking place if you are going on holiday within the next month as there may be limited support for patients if there are any post-surgery complications.
- Healing rates vary between individuals, but it is likely to be several weeks before a return can be made to sports or swimming activities. Returning to sporting activities before the toe(s) have time to heal may result in delayed healing, or complications such as infection.
- Follow-up appointments are not generally required but if you have any concerns, please email a photograph to sgpfed.myfeet@nhs.net along with your contact details or phone 01473 921810. In the meantime, you will be expected to dress the toe(s) yourself as described below:

Post-operative self-care – Redressing and salt water bathing:

- 1) Bathe the foot daily in warm, concentrated salt water (enough salt so that some is not dissolved in the water). This will help reduce infection or prevent the wound from getting infected.
- 2) Allow the foot to dry naturally in the air (by sitting with your foot up on a stool for instance). The toe should then be covered with a sterile gauze dressing to keep it clean. A limited supply of dressings will be provided at your nail surgery appointment. Patients are encouraged to purchase additional dressings from their local pharmacy / online. Do not put the dressing on too tightly.
- 3) Continue to salt water bathe, air-dry, and re-dress the toe daily.

It is common for toes to look unpleasant for a few weeks following surgery and you may find that the toe weeps for several weeks. This is perfectly normal for this type of procedure. However, a rapid increase in pain is not normal and may be an indication of infection. If this is the case, please contact the podiatry team or your GP. You may receive a follow-up questionnaire around 6 months after you have had your nail surgery.

Aspirin, Clopidogrel, antiplatelet drugs and direct acting anticoagulants

If you are taking clopidogrel or a high dose of aspirin this can sometimes cause bleeding following surgery. The podiatry team may wish to discuss your medication with your GP before any surgery is contemplated. The podiatry team will discuss a treatment plan with you at your appointment.

Warfarin

If you are taking warfarin then you should bring documentation of an INR carried out 48-72 hours previously.

If the reading is too high, or your INR readings are not stable, this can delay surgery - the podiatry team will discuss a treatment plan with you at your appointment.

Adalimumab (Humira)

If you are taking Humira then you should ring the podiatry team to discuss a treatment plan before any nail surgery is contemplated. You can reach us on 01473 921810, and our reception team will pass your message to a clinician.

Pregnancy and breastfeeding

We do not carry out nail surgery during the first trimester of pregnancy - the podiatry team will discuss a treatment plan with you at your appointment.

The local anaesthesia used in nail surgery is broken down by the body, and some of these molecules will appear in breast milk. Breastfeeding women are advised to feed their baby with expressed milk for a few hours after surgery (i.e. milk that has been expressed from the breast prior to surgery and stored).

Diabetes

Patients with diabetes should bring documentation of a blood sugar (HbA1c) reading taken within the last 3 months. Your GP practice should be able to arrange this for you.

If the reading is too high, or your diabetes is not stable, this can delay surgery - the podiatry team will discuss a treatment plan with you at your appointment.

Cardiovascular events (heart attack, stroke, deep vein thrombosis, pulmonary embolism)

We do not carry out nail surgery within 6 months of any significant cardiovascular event. Please ring the podiatry team to discuss a treatment plan.

Suffolk Podiatry
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An NHS service provided by Suffolk GP Federation working with ESNEFT (East Suffolk & North Essex NHS Foundation Trust) in the East, West Suffolk NHS Foundation Trust in the West, Suffolk County Council and Norfolk & Suffolk NHS Foundation Trust