

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。

Designed & Produced by the Department of Clinical Illustration,
New Cross Hospital, Wolverhampton, WV10 0QP Tel: 01902 695377.

Nail Surgery

Specialist Foot Health Services

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Wash your hands with soap and warm water and dry thoroughly. Use hand gel, if provided, in care facilities.
- If you have symptoms of diarrhoea and vomiting stay at home and do not visit relatives that are vulnerable in hospital or in residential care. You will spread the illness.
- Keep the environment clean and safe. Let's work together to keep it that way. Prevention is better than cure.

What is Nail Surgery?

Nail surgery is a routine procedure that is undertaken to remove part (known as Partial Nail Avulsion) or all of a nail (known as Total Nail Avulsion).

When do we use Nail Surgery?

Nail surgery is indicated for several nail conditions; primarily it is used for the treatment of ingrowing toenails and fingernails. However it is also used to remove painful thickened nails that have been damaged, either from trauma or fungal infection.

How is Nail Surgery performed?

Nail surgery is normally undertaken under local anaesthetic following consent; this normally involves an injection into the fleshy part at the base of the toe on the top of the foot near the big toe joint. This is very similar to a dental injection and is very quick. The toe will become numb with 5-10 minutes allowing surgery to be undertaken free from pain, your podiatrist will check the toe is numb prior to any surgery being undertaken.

A small tourniquet to restrict blood flow is then placed over the toe; this stops any bleeding during the operation. All or part of your nail will then be removed depending on the initial problem, this process only takes a few minutes. Once the nail has been removed a liquid chemical called Phenol will be applied to the nail bed, this chemical causes a burn and damages the skin cells that cause the nail to grow back. The tourniquet will be removed and the wound and toe will then be covered with a dressing.

Will the operation be painful?

The surgery is painless; however the injection of local anaesthetic can be uncomfortable. After the operation some pain is normal, and most patients will need some pain relief, Paracetamol or your normal painkiller is normally enough to suffice, the pain should settle within a day or two.

Deep Vein Thrombosis (DVT)	All surgical procedures carry a small risk of DVT, or blood clot, as rest is required after the surgery. Nail surgery requires minimal post-operative rest and therefore the risk is very unlikely
Amputation	This is extremely unlikely, but all surgery carries a risk of infection, most infections are treatable with antibiotics. There are very rare cases of Infection that cannot be resolved and this may lead to further surgery in a non-healing toe, this may include amputation.

Normal healing and appearance after partial nail removal



3 days post op



3 weeks post op



6 weeks post op
healed

If you have any further questions or concerns please do not hesitate to contact your podiatrist.

Specialist Foot Health Services: Mayfield Medical Centre

272 Willenhall Road WV1 2GZ

Tel: 01902 444044

Fax: 01902 444195

Opening times: Monday – Friday 8:30am - 5:00pm excluding Bank holidays.

In emergencies outside of normal working hours, please contact:

NHS 111 service on: telephone No: 111 for advice

You will be given a copy of the consent form on the day of surgery once the operating clinician has again asked if you are happy to proceed with surgery. Should you have any questions or concerns prior to the surgery being undertaken, please do not hesitate to ask the clinician.

Are there any risks?

All surgery carries an element of risk or has some potential complication. Nail surgery has been undertaken in this way for many years but there are several complications that can occur, should there be any complications the Podiatry team or your own GP can generally deal with them, occasionally we will need to refer to another specialist.

Post-operative pain	Normal for the first two days or if the wound is irritated by trauma or infection.
Post-operative infection	Increased pain and swelling, occurs especially if wound not kept clean or protected.
Regrowth of nail	Occurs in around 5-10% of all patients that have had surgery, and further treatment may be required, including further surgery.
Loss of nail	Normal for a total nail avulsion however can also occur in partial nail avulsions and may in rare circumstances lead to permanent loss of the nail.
Delayed healing	It takes 4-8 weeks normally to heal however some people can take longer than this.
Nerve trauma	Rarely the injection of anaesthetic can damage the nerves in the toe and cause numbness or longer term pain.
Allergic reaction	This is extremely rare, however some people can be allergic to 1 or more of the chemicals used, normally these are local reactions to skin, however some people can have more severe reactions that require emergency hospital treatment.

How long will it take to heal?

The length of time varies, however 4-8 weeks is normal, this depends on the type of surgery and in some cases patients with certain medical conditions will delay healing.

Will I need a dressing on my toe?

It is important that the toe is covered until the wound has completely healed, leaving the wound uncovered can increase the risk of infection. Following your surgery a thick dressing will be applied to the toe and will need to be left in place and kept dry for 2-4 days. An appointment will be made at the time of your surgery for the dressing to be changed by Specialist Foot Health Services staff. This will normally be at the same clinic where the surgery was undertaken; at this point a smaller dressing will normally be applied so you can get back into more reasonable shoes.

Can I drive after the operation?

It is important that you do not drive or go to work on the day of your operation, as your car insurance may be invalidated. You should go home immediately and rest. You will be able to resume normal activities the next day, but most people will rest and take time from school or work until the first dressing change, which is normally 3-4 days after the operation.

Do I need to go to hospital for my operation?

No, the operation can be safely and quickly undertaken in a clinic setting, some people may have the surgery in hospital if they have certain health issues or need a general anaesthetic (be put to sleep) for the operation.

I am diabetic, is it safe to have the operation?

Your podiatrist will assess how safe it is for you to have the operation, and will always check your circulation, and get a reading of your longer-term blood sugar control.

Sometimes surgery will not be appropriate or may need to be postponed until a later date. Diabetics can have an increased risk of infection post operatively your podiatrist will give you further information on this and ways to avoid infection.

I am on Warfarin, can I have surgery?

This depends on the reason you take Warfarin, normally your podiatrist will have a discussion with your anti-coagulation team to decide if you need to suspend or reduce your dosage of warfarin, a blood test on the day of surgery is also normally required to make sure your blood clotting levels are safe to proceed. Your podiatrist will discuss this further with you if applicable.

I am pregnant, is it safe to operate?

We will normally avoid surgery in the 1st and 3rd trimester of your pregnancy, unless the problem becomes an emergency, i.e. Infection is present. In these cases we will remove the nail and not apply the chemical to stop nail growth, this may mean further surgery is required once the baby has been born. In cases of breast feeding we may wait until this has been completed, or we may ask you to suspend breast feeding for a short period of time.

I am scared of needles, can I have a general anaesthetic?

This can be organised in extreme cases, but may delay your treatment, for most people that are needle phobic it may be appropriate to organise a mild sedative to help you relax. Please discuss this with your podiatrist.

Will my nail grow back?

The aim of the operation is to stop nail growth reoccurring so you will retain the shape of the nail, but the nail will not generally grow back and a toughened area of skin will develop to protect the area, unfortunately in some cases the nail will regrow and you may require further surgical or conservative treatment.

Are there any benefits?

Deformity reduction - The nail deformity should be reduced in thickness or curvature, and in most cases will cosmetically look improved, this may take a few months to settle as the new nail grows out (partial nail avulsion only).

Reduction in pain - Removing the offending piece of nail that causes pain should reduce or remove all the pain from the toe once healed in the majority of cases.

Long-term Infection risk reduction - Removing the section of nail that is in-growing will allow the toe to heal and prevent further infection in most cases.

Improved mobility - Removing the offending piece of nail should improve pain levels and allow better footwear fit, therefore improving mobility in most cases where pain has been an issue prior to surgery.

What are the alternatives?

No Surgery - In some cases conservative treatment may be an option, your podiatrist will discuss this with you and advise if this is appropriate in your case.

Surgical Excision - This is an option where the nail and soft tissue is cut out and the wound to be stitched afterwards, this procedure is normally undertaken in an operating theatre. The wound will generally heal within 2-3 weeks after stitches have been removed, however there is a higher incidence of the nail growing back and becoming more deformed. Patients can often report higher post-operative pain levels with this type of surgery.

Consent

It is standard practice that we ask for written informed consent for any treatment that involves anaesthetic or requires surgery. For those that are under the age of 18 or for those that cannot consent for themselves a parent or legal guardian is required to agree to the procedure and sign the consent form.