



## EASTPOINT PODIATRY

# PARTIAL OR FULL NAIL AVULSION SURGERY

## Patient Information Leaflet

**[www.eastpointpodiatry.com.au](http://www.eastpointpodiatry.com.au)**

**FOOT & ANKLE PAIN - RUNNING INJURIES - ORTHOTICS - NAIL & SKIN CARE  
- FOOT & ANKLE SURGERY - BUNIONS - POSTURAL ANALYSIS - DIABETIC**

**FOOT CARE - KIDS FEET**

**Shop 31, Railway Concourse**

**9 3 6 2 4 1 1 1**

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## What causes an ingrown toenail?

The following are some of the common causes of ingrown toenails

- Inherited: Some people grow very wide and rounded nail plate.
- Poor biomechanics: Having flat feet or bunions can change the way your toe sits.
- Poor Nail Care: The way you cut your nails may leave sharp spikes.
- Footwear: Tight shoes may press on the side of the toenail.
- Injury / infection: Changes the growing area of the nail bed.

Toenails take about nine months to grow from the nail base to the top of the toe.

Sometimes problems begin when pressure from footwear distorts the growth of the nail, or the nail is trimmed into the curved shape. This allows one of its vertical edges to pierce the groove in which it lies.

One type of Ingrown toe nail produces corns growing within the nail bed and prevents the sufferer wearing closed shoes. These may never become infected, but produce excessive pain.

Most common is the infected and inflamed ingrowing toenail, sometimes very painful. The skin around the nail appears swollen and red; sometimes pus may be visible under the skin. If the nail has become ingrown several times, or the shape of the nail is so badly deformed that it is likely to re-grow, a decision may be made to remove part of the nail root. The end result will produce a normal looking but slightly narrower nail. If the nail has become very deformed or if removing side sections would achieve an unsatisfactory result, the final option is to remove the entire toenail. The operation is carried out under a local anaesthetic. The foot is cleaned with an antiseptic and local anaesthetic is given by two injections to the affected toe, one each side at the base. The anaesthetic lasts a couple of hours and will totally block all pain sensation during the operation. The offending nail or nail section is then removed.

## The Procedure (PNA or TNA)

Partial or Total Nail avulsion, or nail surgery, is a minor surgical procedure to remove part or the whole of a nail plate. Once numb, a

tourniquet is applied to reduce bleeding. No cutting or stitching is involved. The appropriate section of the nail is simply lifted and removed from that part of the nail bed. The nail matrix, which is the area that produces the nail plate, is then treated with the chemical Phenol to prevent re-growth of the nail. The tourniquet is then removed. A sterile dressing is applied before you leave the clinic. The whole procedure takes about an hour, although the anaesthetic may be effective for several hours. On rare occasions, for medical reasons, we may decide not to operate when you come for your appointment. This method of nail surgery is known to be very safe and effective. The following outcomes can be associated with nail surgery:

- Nail Regrowth - Every step is taken to prevent the regrowth of the nail. This occurs in approximately 3 out of 100 patients. If this does occur, it may not cause any further problem. If it does, the procedure can be repeated.
- Delayed Healing - Healing can be slow and can last from 4-8 weeks. However, average healing times are between three to six weeks, depending on your age, health, how rapidly your skin heals, and you look after the toe after surgery.
- Phenol Burns - Occasionally, the Phenol used to stop the nail growing back spreads onto the skin next to the nail. If this occurs, it can be painful and can delay the healing time. The Podiatrist will advise you on what can help with this situation.
- Infection - Any minor surgery can lead to infection. All precautions will be taken to prevent such an infection. This may present itself as a painful, swollen, red, inflamed, throbbing, and/or hot toe. If this does occur, the Podiatrist can advise you further.
- Bleeding - There is little or no bleeding during the procedure, however, bleeding may occur afterwards. It is important to relax for the rest of the day with your foot elevated. Additional advice will be given following surgery.

The area is dressed with a large bandage; therefore you must bring with you a pair of

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open toed sandals, or cut the toe out of an old pair of trainers/slippers. (This is extremely important.)

### **Important information for the day of the surgery**

You are allowed to eat before the surgery. It is advisable to bring with you open toed shoes or sandals to allow room for the dressing, which can be quite bulky. Make arrangements for getting a lift home with someone, as you will not be covered by your car insurance to drive for 12 hours. Please inform the Podiatrist on the day of surgery of any changes in medication or changes in your health. Please bring the names of any new medicines with you. You will be expected to dress your toe(s) yourself after the first week. Sterile dressings and adhesive tape will be issued to you from the clinic. You may require some time off work, college or school (if you require a certificate, please let us know and we shall provide one).

### **Initial Aftercare**

The following guidelines are recommended to help you have a quick and pain free recovery after your operation:

- Wear loose-fitting footwear to accommodate the bulky dressing e.g. open toed sandals or large slippers.
- Check that your bedding is loose enough to prevent pressure on your toes.
- Keep the toe dry until the first dressing appointment.
- For the first couple of days you should rest as much as possible.
- It is advisable when you get home to rest with your feet elevated for the first 2 hours. This helps the blood to clot and promotes healing.
- Painkillers may be necessary initially as the anaesthetic wears off. Avoid Aspirin based products. Avoid any activities that may injure the toes, such as swimming or sport until advised by the Podiatrist.
- Avoid driving for 12 hours and alcohol should be avoided for 24 hours.
- The toe may bleed initially through the dressing. This is not uncommon. Do not be alarmed. If the toe bleeds through the initial dressing, put an extra dressing on top and do not disturb the original dressing.

- Remember to wash your hands with soap and water before applying the dressing. Dressings will reduce in size over the coming week.
- The toe will give off a light yellow discharge, which can give the impression of an infected toe. Some minor discharge is normal. Infection will normally show as an increase in pain, redness, heat and/or thick yellow discharge. If you suspect you may have an infection then contact the clinic.
- You will be expected to dress your toe(s) yourself after the first dressing change. You might be asked to come back for a second or third dressing change if the need be.
- You will be reviewed periodically to ensure healing is taking place. Healing times can vary from 4 -6 weeks, depending on the individual. A scab will form over the wound and the amount of discharge will reduce. Eventually the scab will come away and a very thin, smooth layer of toughened skin will form over the nail bed, which serves a protective function.
- If you have any concerns between appointments you should contact the clinic.

### **Ongoing Aftercare and Dressing**

You might be asked to apply simple fabric band aids following your surgery. Your podiatrist may ask you to do saline bathing for few weeks, which usually done after a shower and prior to a dressing change.

Before you start make sure you have the following:

- About 20 minutes of uninterrupted time
- Clean bowl (big enough to fit your foot in it)
- Clean soft towel
- Two tablespoons of salt
- Dressing materials or band aids.
- Half fill the bowl with clean lukewarm water, make sure it is not too hot – (ideally this would be boiled water left to cool but it is not essential).
- Add one table spoon of salt for 1 Lt of water, or two for 2 liters.
- Immerse the foot in the water for 5-8 minutes
- Then cover it with the dressing or band aid.

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