

Good-bye, Bunions

You don't have to put up with them anymore.

BY FLORENCE ISAACS

One Sunday two years ago, my mother slipped off her shoes to show me her severe bunions. They looked terrible and they hurt her so much she had to wear special shoes most of the time. "I should have had surgery twenty-five years ago," she said. Certain that my own bunion, already large, would get worse, I quickly made arrangements to have a bunionectomy, surgery to correct the condition.

An enlargement of bone at the big toe joint, bunions afflict almost 6 percent of Americans, according to the American Podiatric Medical Association (APMA). They can hurt so badly that walking, sometimes even standing, becomes all but impossible. Most sufferers are women, usually in their 60s or older. Although bunions run in families (like mine), they're aggravated by narrow shoes that compress the forefoot. In a study of foot surgeries, Michael J. Coughlin, M.D., found that 94 percent of bunionectomies were done on women and many had worn tight shoes.

To Cut or Not to Cut?

Once formed, a bunion does not go away. Marianne Long of Clemmons, North Carolina, put up with hers for 20 years. With six children, she didn't think she had time for surgery. "I managed by wearing flats and stretching my shoes to widen them," says Marianne. Experts also suggest wearing special shoes with a higher, wider toe box. Custom-made orthotic devices, which fit inside shoes to reduce pressure on bunions, may help some people. Or you can try over-the-counter bunion shields to relieve pain and ultrasound treatments to reduce swelling.

The only cure for bunions is a bunionectomy, which is performed by orthopedic surgeons and podiatrists. Nearly 150,000 were done in 1994; Marianne Long finally had one in 1993 at age 65. The success rate is to 80 to 90 percent, according to Lowell Scott Weil, D.P.M., former president of the American College of Foot and Ankle Surgeons.

Most experts suggest having surgery only if you have to. But appearance alone motivates some. Jean Pascoe Graham, a retired editor in Panama City, Florida, had surgery on both feet for cosmetic reasons. "All my shoes had bulges. Now my feet look so nice. For the first time, I can go barefoot without feeling ashamed," says Jean.

Getting Ready

I thought hard about surgery. I knew I'd have a hard time getting around afterward, and if something went wrong I'd be in a real bind. Get at least two opinions from board-certified orthopedic or podiatric surgeons before you commit. According to the APMA, 72 percent of bunion surgeries are performed by podiatrists, non-M.D. foot-care specialists with a D.P.M. after their name. I chose Mark J. Landsman, D.P.M., of New York City, who performs many bunionectomies each year. If you choose an orthopedic surgeon, look for one experienced in bunion surgery.

Ask a surgeon for a diagnosis and the type of procedure he suggests, since there are more than 100 ways to operate on a bunion. I had a moderately severe bunion with joint deterioration, and my big toe angled inward. Dr. Landsman cut and reset the first metatarsal bone, getting rid of the bump and realigning the toe. With this procedure the chance of a bunion returning is only 2 or 3 percent, but the rate rises to over 50 percent if the bump is just shaved. Surgery costs between \$1,000 and \$6,000, and is usually covered by insurance.

Going Through with It

I had my bunionectomy in Dr. Landsman's office with a local anesthetic. Arriving before 10 o'clock on a Friday, I hobbled out with my husband around noon with a bandaged foot immobilized in a surgical shoe. I stayed off my feet for the weekend, kept the foot elevated and applied ice to reduce swelling. Many people go back to work by Tuesday, but it depends on how much you have to stand. I was at my computer on Monday. My stitches were taken out in two weeks, and at four weeks Dr. Landsman removed the pin that had helped hold the bones together. At five weeks I could wear sneakers and pedal my exercise bike, and at six weeks I wore flats. I did toe exercises for flexibility and had ultrasound to speed healing.

My foot hurt at first, which I expected. Others have told me the pain is awful. It may take months for all aches to go away. I was more bothered by my lack of mobility during the first month and fears that someone might step on my foot. Two years later, I'm fine, and I'd do the same thing again. But not everyone is as lucky. *Woman's Day* assistant art director Michelle Braverman first noticed a bunion on her right foot at age 46. She had surgery to shave the bunion, but three years later it came back. She had another bunionectomy in 1993, this time having the bone realigned. Although her bunion has not returned, she found the surgery painful and disrupting and would not do it again. In the end, you have to decide what is best for you. **WD**

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