Surgical technique for phalangeal osteotomy

TriMed®

CONCEPT

Phalangeal osteotomy is one of the crucial elements on forefoot surgery. It can be used in mono or bicortical, varisation, valgisation, derotation or shortening osteotomies. When a phalangeal osteotomy is used to treat hallux varus, it is often an indispensable adjunctive procedure in more extensive surgical corrections of the forefoot.
The procedure must be simple which means using a quick and reliable form of fixation.
system with double compression screws guided by wires is the ideal system to use for phalangeal osteotomies, except in cases of severe osteoporosis or extrem derotation.

Operative technique

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A phalangeal screw can be used in most P1 osteotomies.
The cut should preferably be at the slight angle, so that the screws axis is perpendicular to the osteotomy line.

1 - Introduce the 0.8mm wire, perforating both cortical walls and maintaining the reduction.

2 - Guided drilling is performed using the blue and grey ring drill.

3 - Read the length of screw necessary off the drill once the cortex is reached, but before perforating it.

4 - Prepare the superior cortex, using the cannulated blue ring countersink. The drilling must be carried out through the entire height of the countersink's conical portion.

5 - Place screws using the cannulated blue and grey ring screwdriver. Once the head rests on the cortex, give the screw one more turn until locking.

6 - The screw head should then be completely sunk.