

Greater Manchester Shared Services Effective Use of Resources Team  
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Policy Name:	<a href="#">Bunion (Hallux Valgus) Surgery</a>			GM Policy Ref:	GM052
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#### Policy exclusions

Hallux Rigidus is excluded from this policy. Patients may be referred for assessment as clinically appropriate.

Treatment/procedures undertaken as part of an externally funded trial or as a part of locally agreed contracts / or pathways of care are excluded from this policy, i.e. locally agreed pathways take precedent over this policy (the EUR Team should be informed of any local pathway for this exclusion to take effect).

#### Policy inclusion criteria

The presence of a bunion does not indicate a need for surgery. The decision to refer a patient for surgery should be based on pain, disability, and functional impairment.

In line with the British Orthopaedic Association's Commissioning Guide: Painful Deformed Great Toe In Adults, patients may be referred for surgery when:

- There are repeated episodes of ulceration / infection necessitating surgery

#### OR

- If there are associated problems with hammer toes or pain under the ball of the foot (suggesting excessive foot strain as big toe is not functional)

#### NOTE:

- Most bunions can be alleviated by modifying activities and / or shoes
- Surgery has a LONG recovery time (up to six months for full recovery)
- Surgery carries a risk of complications, some of which may require further surgery
- Treatment for bunions is not affected by 'severity' so a 'before it gets worse' approach is not necessary

#### Funding Mechanism

Monitored approval: Referrals may be made in line with the criteria without seeking funding. **NOTE:** May be the subject of contract challenges and/or audit of cases against commissioned criteria.

Clinicians can submit an individual funding request outside of this guidance if they feel there is a good case for clinical exceptionality. Requests must be submitted with all relevant supporting evidence.