

ARE BUNONS YOU BACK?

A bunion, also referred to as hallux valgus, can be painful. Pain caused by bunions can restrict your ability to do everyday things. Unfortunately, this condition is permanent unless surgically corrected. With InCore Lapidus, **reinforcements are here**. This system is designed to address the root of the problem, tackling your bunion pain with a three-part construct that offers a clinically-proven solution.⁴

WHAT IS A BUNION?

A bunion is a bump made up of bone and soft tissue that forms on the joint at the base of the big toe. When the big toe pushes against the next toe, the joint of the big toe gets bigger, sticks out, and the skin over the bump or bunion may become red and very sore.

The most common cause of bunions is inherited problems in the foot, injuries, stress on the foot and sometimes arthritis. Wearing shoes that don't fit correctly also contributes to the cause, including shoes that are too small or with a narrow, pointed toe box that squeezes the toes into an unnatural position.

SYMPTOMS MAY INCLUDE:

- A bump that bulges on the outside of the base of the big toe
- Swelling, redness and/or soreness around the big toe joint
- Corns or calluses where the big toe overlaps the second toe
- Restricted and painful movement of the big toe
- Skin thickening at the base of the big toe



NEED TO RELIEVE YOUR BUNION PAIN?

When it comes to relieving bunion pain, there are many different treatment options. Depending on the severity of your bunion pain, these can range from conservative, non-surgical treatment options to bunion surgical removal. Be sure to consult your doctor to discuss the best treatment plan for you.

CONSERVATIVE (NON-SURGICAL) OPTIONS³

Wide, supportive shoes – Wearing more comfortable shoes that accommodate the bunion deformity and provide more space for the toes may help avoid friction against the bunion.

Orthotics and over-the-counter inserts – Shoe inserts and prescription orthotics help provide additional support for the foot and can redistribute pressure across the foot. Inserts and orthotics can help manage the symptoms and possibly prevent the bunion from getting worse.

Accommodative padding – This can help provide a cushion between the bunion and your shoe reducing pressure and friction.

Bunion splints – Splints can be worn to straighten the big toe and temporarily reduce pain, but they do not correct a bunion.

Physical therapy – Certain exercises can improve the strength and stability of the joint. Toe exercises to strengthen the joint like flexion and extension exercises of the big toe can be helpful.

Medication – Non-steroidal anti-inflammatory drugs, over the counter pain medication, injections, and ice can help reduce inflammation, swelling, and pain related to a bunion. Ask your doctor what medications are appropriate for you.

SURGICAL OPTIONS³

Bunions are most commonly classified as mild, moderate, severe, and arthritic. If your doctor recommends surgery, the procedure selected is typically based on the degree of the bunion deformity.

Exostectomy – During this procedure, the bump or enlarged portion of bone is removed; though it's rarely performed in isolation. Usually, the soft tissues (muscles, tendons and ligaments) surrounding the joint are balanced as well. An osteotomy or joint fusion/realignment may take place as well.

Osteotomy – An osteotomy involves cutting the 1st metatarsal and/or big toes bones to shift and realign the bones into a more normal position. This can correct the abnormal angle of the big toe. There are multiple ways of doing this procedure.

Joint fusion/realignment – This can be performed for an unstable joint and/or severe deformity. Instead of cutting part of the bones to achieve a corrected alignment, this procedure realigns the entire bone. This stabilizes the joint, but still maintains motion of the big toe joint.

Total joint fusion – If the big toe joint is severely arthritic or damaged, a complete joint fusion may be performed. This procedure might eliminate the pain, but will also result in complete loss of motion in the big toe joint. In some cases, a joint implant may also be used. This type of procedure would be considered an end-stage treatment.





% Hardware Removal

Studies show up to 17% hardware removal due to pain and irritation when addressing the issue surgically with plating constructs.^{1,2} The InCore Lapidus System is designed to address this issue, offering a solution that is internal to the bone (intraosseous) rather than entire construct sitting on top as seen in traditional procedures.

WHY INCORE® LAPIDUS?

When considering treatment options for your bunion correction, you may hear of systems that use plates to correct your bunion. The issue with plates is that they can often be felt beneath the skin and cause irritation. This is similar to walking with a small pebble in your shoe. Although it is small, it can be felt within your shoe and cause discomfort. The InCore Lapidus Bunion Correction System uses an intraosseous, or inside the bone, technique to treat your bunion. And because the implant is within the bone, not on top of the bone, the system is designed to minimize irritation.

Minimize prominence

Designed with you in mind, the InCore Lapidus System is internal to the bone, intended to address the frustrations of patients with pain and irritation caused by traditional external plating methods.^{1,2}

Precise correction backed by clinical success⁴

This system offers the surgeon and patient a viable solution designed to minimize the need for hardware removal.^{1,2}

Stabilize correction in all three planes of the foot

Correcting the toe's rotation is critical for reestablishing alignment, the root cause of your bunion. The InCore Lapidus System is designed to provide your doctor with a triplanar correction designed to aid and stabilize your bones in efforts to facilitate and maintain alignment.

The device may not be suitable for patients with insufficient, immature, or abnormally shaped bone, or patients with blood supply issues. The following are potential risks with InCore Lapidus surgery, any of which may require additional surgery: Infection; nerve damage due to surgical trauma; loosening or migration of the implant, or bending or fracture of implant; pain, soft tissue discomfort or abnormal sensation due to the presence of the device; allergies or other reactions to implant materials; nonunion or delayed union (failure of cut bones to heal back together) which may lead to breakage of the implant; inadequate healing; and/or blood clot. Talk to your surgeon about each of these risks.



PRE-OPERATIVE



INCORE® LAPIDUS SYSTEM



POST-OPERATIVE





WITH YOU EVERY STEP OF THE WAY

MYMOBILITY® WITH APPLE WATCH

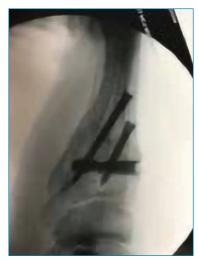
Preparing for and recovering from surgery can seem overwhelming. Knowing what to expect and receiving timely reminders can help ease the process as you approach your surgery date. mymobility keeps you connected to your surgeon and care team throughout this process to assist you in many ways including:

- Understanding your condition and optimizing your health prior to surgery
- Learning what to expect the day of surgery
- Knowing the steps you can take to help minimize complications after surgery
- · Offering guidance as you work toward regaining mobility

^{*}Patients must have a compatible smartphone device to use mymobility. mymobility must be prescribed for appropriate patients by a surgeon who uses the mymobility digital care system. Ask your surgeon if you are a candidate.









PATIENT INFORMATION⁴

Case study

A 48-year-old female presented with a complaint of right bunion pain. She had concerns with "bump" pain with shoes and certain activities. Additionally, she reported heel pain with exercise. She had failed arch supports, wider shoes, anti-inflammatories, and wearing a toe spacer. She relates developing a bunion when she was a teenager, but it became increasingly symptomatic only over the past 2-3 years.

Conclusion

This case demonstrates the appropriate use of the InCore Lapidus System. This construct offers the surgeon and patient a stable construct, proper joint preparation (cleaning or cutting), and is intended to minimize the need for hardware removal due to pain and irritation with traditional external plating constructs of first TMT arthrodesis.^{1,2}

References

- Cottom, James M et.al. Fixation of Lapidus Arthrodesis with a Plantar Interfragmentary Screw and Medial Locking Plate: A Report of 88 Cases. The Journal of Foot & Ankle Surgery. 52 (2013) 465-469.
- 2. Peterson, Kyle S. et al. Symptomatic Hardware Removal After First Tarsometatarsal Arthrodesis. The Journal of Foot & Ankle Surgery. 55 (2016) 55-59.
- Sachs, B. (2020, Aug 31). How Do You Treat Bunions? ReadyPatient. https://www.thereadypatient.com/foot-ankle/how-do-you-treat-bunions.html
- Lee, M. (2019). InCore[®] Lapidus Case Study. Zimmer Biomet. 2603.1-GLBL-en-REV0619

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