

Removal of toenail surgery

Information for patients



Please contact a member of nursing staff at the appropriate day unit if you wish to discuss your operation before your admission to hospital (Contact numbers can be found at the end of this leaflet).

The Procedure

Ingrowing toenails range from moderately curved nails which press into the fleshy fold at the side of the toe, to the nail which has grown forward and pierced the flesh, causing scar tissue to build up. This often leads to infection.

There are three treatment options:

Simple removal of the toenail

This is performed either as a primary treatment or if the nail is infected. The nail will usually grow again, and the chances of the nail causing further problems is about 50%.

Wedge Excision

This is removal of part of the toenail and sometimes treatment of part of the nail root, by excision or with application of phenol, to prevent regrowth. Some patients will develop further problems with regrowth and infection. Wedge excision results in a slightly thinner nail.

Zadek's Procedure

This is where the toenail and the nail bed are removed, usually for recurrent ingrowing toenails. As the nail root contains the cells from which the nail develops, removing the nail root as

well should stop the nail from regrowing. Normally, Zadek's procedure cannot be carried out if there is infection present.

These procedures may be performed under local or general anaesthetic.

The surgeon will recommend the most appropriate treatment for you.

Before Your Operation

If you are having a general anaesthetic, you will have a pre-screening appointment to assess your suitability for day surgery, before you are given a date for your operation. At this appointment the nurse will take details of your:

- medical history
- current medication
- home care arrangements after you have been discharged from hospital.
- You will need somebody to collect you from hospital and somebody to stay with you 24 hours after your surgery.

Please use this opportunity to ask any questions about your surgery and after-care. Where possible, the nurse will arrange a mutually convenient date for your surgery. S/he will also give you instructions about preparing for your operation, which will include advice about:

- having a bath or shower before you come to the hospital
- eating and drinking
- taking your normal medication, if appropriate
- returning to work after surgery

On the day of surgery

You should have a bath or shower before you come to hospital.

If you wear contact lenses, you will need to remove them prior to your operation. Please bring your spectacles or an extra pair of contact lenses with you.

Please bring a dressing gown and open toe slippers/shoes with you. Valuables and large amount of money (over £10) should not be brought into hospital with you.

On admission to the unit you will be greeted by a nurse who will check that your details are correct. The surgeon and the anaesthetist (if you are having a general anaesthetic) will talk to you and you will be invited to ask any questions you may have.

A member of staff will escort you, as you walk if you are able to, to the operating theatre.

Following your operation

You will be transferred to the ward area where nurses will continue to monitor your condition. If you feel any discomfort, please inform the nurse looking after you, so that pain relief can be given.

As long as you do not feel sick (after a general anaesthetic you must have something to eat and drink, prior to going home.

After about 1-2 hours, if the nurse feels you are sufficiently recovered, you may be discharged home.

As necessary, the nurse will advise you about:

- arrangements for removal of stitches
- reduction or removal of the wound dressing
- arrangements you need to make with your own Practice Nurse.

Care at home

You may be prescribed painkillers to take home with you. Please take only as directed on the packaging. Please ensure that you have your own supply of paracetamol and ibuprofen at home.

You will need to rest for two or three days with your foot elevated above the level of your knee. This is particularly important in the first 24 hours. However, it is very important that you keep moving your ankles, in order to prevent a deep vein thrombosis (blood clot) forming in your calves.

The practice Nurse will reduce your dressing after two or three days. You may gradually build up your activities after this.

Walking will be difficult until the bandage is reduced. You should wear soft shoes or open toed sandals to prevent rubbing on the operation site, and keep your foot elevated for up to one month when resting, to help reduce the swelling.

If there are stitches in your wound these will be removed 7-10 days following your surgery, by your Practice Nurse.

You will not be able to drive until after the dressings have been reduced and you can safely perform an emergency stop.

Please check if your insurance policy prohibits you for longer, following a general anaesthetic or surgery.

You will need about one week away from work, depending on your occupation. Your doctor will advise you about this.

Occasionally a small amount of the nail root is left behind resulting in a spike of nail regrowing. This can easily be removed under local anaesthetic.

It is important to cut your toenails properly. Always let the nail grow out to the end of the toe and cut horizontally across, not into the corners of the nails.

Possible Complications

Minor

- slight oozing of blood from operation site
- infection at the operation site

Moderate

- recurrence of the ingrowing nail

Please contact your GP, if you develop:

- a temperature
- fresh bleeding or bruising
- redness or swelling at the operation site
- pus or drainage from the operation site
- prolonged or severe pain

**If you have any problems or cause for concern
please contact:**

Your General Practitioner or the relevant Day Unit:

David Beevers Day Unit, St James's Hospital: 0113 206 5786
(Monday 8.00a.m. to Saturday 12 noon inclusive)

Wharfedale Hospital Day Unit: 0113 392 1713

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