

Cosmetic Foot Surgery: A Step in the Wrong Direction

Glenn B. Pfeffer, MD

The preponderance of forefoot problems occurs in women, usually as a result of ill-fitting, fashionable shoes. Surgery is often required to correct these problems. Some women are unaware of the direct relationship between fashion shoes and foot deformity, while others are willing to accept the consequences. Societal expectations and work dress codes perpetuate the problem. In this issue, a group of authors from Brigham and Women's Hospital, Boston, Massachusetts present an interesting review of women's shoe wear and foot deformity from a radiologic perspective.



Over the past decade, there have been numerous stories in the public media on cosmetic foot surgery. Most members of the American Orthopaedic Foot and Ankle Society (AOFAS) have seen patients who request correction of painless hammer toes or asymptomatic bunions. Given the potential complications of any surgery, however, the AOFAS recommends that foot surgery "never be performed in the absence of pain, functional limitation, or reduced quality of life."¹

One can hardly blame women for considering a cosmetic procedure on the foot. Almost every other body part is amenable to cosmetic correction, so why not the toes? These patients, however, are rarely just concerned about cosmetic issues. They are also worried about progression of their foot deformity. It is our job as physicians to outline conservative care, discuss the risks and benefits of surgery, and assure these patients that their deformity will not necessarily progress. Once they understand that hundreds of thousands of pounds of stress are placed on the foot during 1 mile of walking, and that surgery often involves cutting tendons and removing bone, they usually have little interest in pursuing a cosmetic procedure.

Unfortunately, not all surgeons take this approach. There is a disturbing increase in the number of Web sites in which physicians encourage surgery on asymptomatic feet, not for just cosmetic reasons, but to prevent "future problems." These Web sites mislead the public and suggest that operating on a painless bunion will avert future arthritis, or the need for a more complex surgical

reconstruction. Hammer toes not only are unpleasant to look at, explains one Web site, but they also tend to progress and lead to further disfigurement. Even children have not been spared. A painless flat foot in a child should be surgically corrected, a surgeon recommends on one site, in order to prevent foot pathology in the future. These statements would scare almost any patient into surgery.

If this is the information published on the Internet, imagine what is told to a patient in the privacy of an examination room. And what is told to the patient's health insurance, to justify the proposed procedure?

While it is true that these Web sites are uncommon, and that most foot and ankle specialists condemn them, how many patients have to undergo unnecessary surgery before something is done? At the end of last year, the California Orthopaedic Association requested that the California Board of Podiatric Medicine review a site focused on cosmetic foot surgery to determine if it was misleading to the public. The Board responded in a letter, dated December 20, 2010, that they had conducted a review and found there "was no apparent violation of the law."

As we face cuts in healthcare dollars, the best way to control costs is to eliminate wasteful and inappropriate medical care. The types of surgeries recommended on the above sites would be a good place to start.

AUTHOR'S DISCLOSURE STATEMENT

The author reports no actual or potential conflict of interest in relation to this article.

REFERENCE

1. American Orthopaedic Foot and Ankle Society. AOFAS Position Statements: Cosmetic Foot Surgery, December 29, 2003. http://www.aofas.org/Scripts/4Disapi.dll/4DCGI/cms/review.html?Action=CMS_Document&DocID=191. Accessed March 21, 2011.

Dr. Pfeffer, the journal's Associate Editor for Foot and Ankle, is Director, Foot and Ankle Center, Cedars-Sinai Medical Center, Los Angeles, California, and President of the California Orthopaedic Association.

Address correspondence to: Glenn B. Pfeffer, MD, 444 South San Vicente Blvd, Suite 603, Los Angeles, CA 90048 (e-mail, Pfefferg@cshs.org).

Am J Orthop. 2011;40(4):174. Copyright Quadrant HealthCom Inc. 2011. All rights reserved.