



FOOT FOCUS



Debbie Thorpe of Spire Norwich Hospital, talks to Consultant Orthopaedic Surgeon Mr George Smith about his thoughts on common foot complaints, treatments available and what brought him to beautiful Norfolk.

O rthopaedic Surgeons are devoted to the prevention, diagnosis, and treatment of skeletal complaints. They often deal with acute injuries, congenital and acquired disorders and chronic arthritis or overuse of the joints, bones and the soft tissue around them. Mr George Smith, Consultant Orthopaedic Surgeon at Spire Norwich Hospital discusses some of the common conditions and treatments he faces in his clinics.

I see from your resume, George, that you have worked in Orthopaedic Units in the UK, Canada and the US. What brought you to Norwich?

“Norwich has a fantastic reputation for orthopaedic surgery. One of the first prosthetic hip replacements was designed here and the Orthopaedic Department at the Norfolk and Norwich Hospital has had more recent presidents of specialist societies than any other in the UK. As a Centre of Excellence for Orthopaedic Surgery Norwich is internationally regarded and since my appointment in 2013 I have witnessed it continue to flourish.”

What have been the greatest recent advances in foot and ankle surgery?

“I would suggest the development of both arthroscopic (keyhole) and minimally invasive surgery have had the greatest effect on patient care. Advances in ankle replacements have also revolutionised the management of patients with ankle arthritis.”

What is arthroscopic surgery?

“Arthroscopic surgery typically involves two small (3-4mm) incisions over the painful joint or tendon. The initial skin incision allows a small camera to be passed into the area of concern and the other incision allows the introduction of instruments. With these instruments it is possible to remove impinging pieces of

cartilage, inflamed tissue or even fuse the joint.”

What are the most common keyhole surgery conditions?

“The majority of my patients I perform arthroscopic surgery on have suffered an ankle injury and I am looking to treat either a painful piece of loose cartilage or an impinging area of bone. With the arthroscopic camera it is possible to achieve an excellent view of the joint or tendon and deal with the issue.”

What are your thoughts on surgery for bunions?

“Bunion corrective surgery is actually a tricky procedure to get correct. Research has clearly shown if it is not performed to a high standard patient satisfaction drops. Recurrence of the bunion, stiffness and ongoing discomfort are all problems that can happen. The majority of patients (around 80pc) are very happy with the outcome, but I believe it is extremely important to be frank about the chances of success. I see a substantial number of patients referred for a second opinion who have had bunion surgery elsewhere with ongoing pain. That is why I would never consider doing a bunion corrective procedure for cosmetic reasons alone. My strongest recommendation is to research your surgeon well, ensure they are appropriately trained and experienced.”

You mentioned minimally invasive surgery (MIS), is this something you do?

“Yes, in 2012 I was fortunate to train in the Fortius Clinic and the London Orthopaedic Clinics for six months. These are both units that perform a large number of MIS operations. I have attended training courses for MIS but these only provide the basic skill. There is no substitute for a prolonged period of time working alongside surgeons who do a huge number of these procedures. The occasional user cannot gain the particular skill set required to use MIS successfully.”



There are many different foot conditions, from sports injuries to arthritis
Picture: GETTY IMAGES/ ISTOCKPHOTO

What are the advantages of MIS?

“I recently gave a national talk to Foot and Ankle Surgeons on this exact topic. The believed benefits are associated with the smaller wounds and presumed faster rehabilitation. Research has linked MIS surgery to less infections, less stiffness and a faster return to work. As it is still a developing surgical specialty, a clear and frank discussion with your surgeon is required to weigh up the potential risks and benefits. Unfortunately, it is not suitable for every patient or every condition.”

What procedures do you perform using this technique?

“The most common conditions I treat with MIS are osteoarthritis to the great toe, pain at the lower end of the Achilles tendon (insertional Achilles tendinopathy) and part of the procedure to treat a patient with a painful flat foot.”

George, I see you played high level sport and you have a masters degree in sports

medicine. Do you have a particular sports medicine interest?

“I played a lot of sport when I was younger and my passion seems to have moved from playing it to treating people who have fallen fowl of it! Rugby was my main sport and I played for many teams, even being picked for the West Australian state squad when I played a season in Perth.

“I do see many patients in my clinic with sports injuries ranging from professional footballers to weekend warriors! I was fortunate in my six months at the Fortius Clinic to help treat professional footballers and rugby players. This has provided me the knowledge and experience of managing the particular demands that come with treating high-level athletes.”

You also mentioned ankle replacement surgery, is this something you perform?

“Yes, I regularly perform ankle arthroplasty (replacement) surgery. The published outcomes from patients who have had

ankle replacement operations 10+ years ago have been acceptable but not on a par with hip and knee replacements. Over the last 10 years we have seen a significant improvement in both the quality of implants for ankle replacement and the quality of the surgery.

Although we do not have long-term follow up data (>10 years) for the latest ankle replacements I feel comfortable that they will be substantially better than previous.

“To try and improve the quality of my surgery further I am the first surgeon in the region to use patient specific cutting blocks that are 3D printed from CT scans of patients’ ankles. Patient specific cutting blocks have been shown to improve accuracy and shorten operating time - both important factors in optimising patient outcomes.”

For further information or to directly make a private appointment with Mr George Smith please contact one of the team on 01603 255614. Further details regarding Consultant Orthopaedic Surgeon Mr George Smith can be found on his consultant profile at www.spirenorwich.com.

All surgery carries an element of risk and the content of this page is provided for general information only. It should not be treated as a substitute for the professional medical advice of your doctor or other healthcare professional.

www.facebook.com/spirenorwichhospital.com

Health worry? Why wait...

At Spire Norwich Hospital our expert care is available to everyone.

- Fast access to appointments
- No waiting lists for treatment

Search “Spire Norwich”

01603 294169