# Randomised controlled trial of Taylor's versus scarf osteotomy for hallux valgus

Submission date	Recruitment status  No longer recruiting	Prospectively registered	
28/09/2007		☐ Protocol	
Registration date	Overall study status	Statistical analysis plan	
28/09/2007	Completed	Results	
Last Edited	<b>Condition category</b> Musculoskeletal Diseases	Individual participant data	
10/07/2017		☐ Record updated in last year	

## Plain English summary of protocol

Not provided at time of registration

# Contact information

## Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

Protocol serial number

N0234179113

# Study information

#### Scientific Title

Randomised controlled trial of Taylor's versus scarf osteotomy for hallux valgus

## Study objectives

Is there any difference in the results of surgery between two commonly performed operations for hallux valgus (bunion)?

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### Study design

Randomised controlled trial

#### Primary study design

Interventional

## Study type(s)

Treatment

#### Health condition(s) or problem(s) studied

Musculoskeletal Diseases: Hallux valgus

#### **Interventions**

Patients who are on the waiting list for surgery for bunions (hallux valgus) under the care of the 3 North Bristol NHS Trust foot and ankle Consultant surgeons will have an x-ray taken in the clinic. If the x-ray shows a suitable position of the bonesfor one of the two operations, and the patient is requesting surgery, then the patient will be invited to participate in the trial. It will be explained by the surgeon listing the patient for surgery.

Patients will receive an information sheet explaining the trial. If they consent to enter the trial, then they will be randomised to receive one of the two operations. Patients will be asked to complete a questionnaire with questions concerning pain and activity level. This can be completed by the patient to ensure no bias is introduced.

The operation will be performed by their usual surgical team. The postoperative care will be the same regardless of which operation is performed. Patients will be seen at 2 weeks, 6 to 8 weeks, 3 months and 1 year for clinical reviews. X-rays will be performed at 6 to 8 weeks and at 1 year. Patients will be asked to complete a questionnaire at 1 year whilst attending the clinic. This will be the final review. Measurements will be taken from the 1 year x-ray and compared to the presurgery x-ray. Patient scores regarding satisfaction, pain, activity levels will be assessed from the questionnaires. Any complications will be recorded as they occur.

The review at 1 year has been chosen because by this stage the patient should have achieved the level of symptoms that they could expect long-term after surgery.

Results will be analysed using a statistical package (SPSS software).

## Intervention Type

Procedure/Surgery

#### Primary outcome(s)

Intermetatarsal angle correction (degrees)

# Key secondary outcome(s))

Not provided at time of registration

#### Completion date

02/01/2008

# **Eligibility**

#### Key inclusion criteria

- 1. Hallux valgus deformity requiring surgical correction because of discomfort, pain, inability to wear appropriate footwear
- 2. X-rays will be measured. The intermetatarsal angle should be between 11 and 18 degrees for inclusion. This range is known as the moderate range and is felt to be suitable for the 2 operations in the trial. An angle greater than this would require a different type of operation.

#### Participant type(s)

Patient

#### Healthy volunteers allowed

No

#### Age group

**Not Specified** 

#### Sex

**Not Specified** 

#### Key exclusion criteria

- 1. Inability to consent it is non-life or limb threatening surgery, therefore patients should be able to consent to a surgical procedure
- 2. Age under 16 unusual to require surgery at this age, and this would lead to consent issues
- 3. Multiple surgery to other toes, foot or ankle will influence results because shape correction may be due to the other surgical procedures
- 4. Distal surgery required will cause bias because not studying the same deformity and angle correction will be affected
- 5. Previous surgery to first metatarsal more complicated surgery, not comparing same condition

#### Date of first enrolment

02/01/2006

#### Date of final enrolment

02/01/2008

# Locations

#### Countries of recruitment

United Kingdom

England

#### Study participating centre

## Southmead Hospital

Bristol United Kingdom **BS10 5NB** 

# Sponsor information

#### Organisation

Record Provided by the NHSTCT Register - 2007 Update - Department of Health

# Funder(s)

#### Funder type

Government

#### **Funder Name**

North Bristol NHS Trust

#### Alternative Name(s)

**NBT** 

#### **Funding Body Type**

Government organisation

#### **Funding Body Subtype**

Local government

#### Location

**United Kingdom** 

# **Results and Publications**

Individual participant data (IPD) sharing plan

#### IPD sharing plan summary

Not provided at time of registration

#### **Study outputs**

Output type **Details**  Date created Date added Peer reviewed? Patient-facing?

Participant information sheet

Participant information sheet 11/11/2025 11/11/2025 No