
Abstract: Proximal chevron first metatarsal osteotomy with lateral capsulotomy, adductor tenotomy, and binding of the first and second metatarsals was reviewed in 88 consecutive cases. Seventy-two cases in 55 patients are reported, with an average clinical follow-up of 41 months. The hallux valgus angle improved an average of 15 degrees, from 32.0 degrees preoperatively to an average of 17.0 degrees postoperatively. The intermetatarsal I-II angle improved an average of 5.5 degrees, from 15.3 degrees preoperatively to 9.0 degrees postoperatively. The lateral plantar first metatarsal angle did not change. First metatarsal length was decreased by 2.0 mm. Union occurred at an average of 2 months. Sesamoid position improved 49%, from a preoperative average subluxation of 80% to a postoperative average subluxation of 29%. Subjective foot score profiles improved from a preoperative average of 70.1/100 to a postoperative average of 94.4/100 with respect to pain, deformity, motion, disability, and cosmesis. There were 10 patients with complications, including three patients with delayed unions, two with second metatarsal stress fractures, one with hallux varus, two with hallux limitus, one with progressive arthritis, one with cellulitis, and one with hallux elevatus. Eighty-four percent of the patients stated that they would undergo the procedure again without reservation, 9% would proceed with reservation, and 7% would not proceed with surgery again if offered. This technique provides reliable successful long-term results for the treatment of moderate and severe symptomatic bunion, hallux valgus, and metatarsus primus varus.