

Accessory navicular

Information for patients, parents and guardians

We've given you this factsheet because your child has an accessory navicular, which is an extra bone (or ossicle) in the foot. We hope this factsheet will help to answer some of the questions you may have.

What causes an accessory navicular?

An accessory navicular is a small extra bone next to the navicular bone (one of the bones on the inside of the foot). It is the most common 'accessory bone' in the foot. Between 4% and 14% of people are born with an accessory navicular and it tends to run in families.

As your child grows, the navicular and the accessory navicular are joined together by cartilage, instead of fusing together as one bone.

Symptoms

An accessory navicular is usually easy to spot by the bump on the foot. We can also do an x-ray to confirm the diagnosis.

Most people who have an accessory navicular won't notice any symptoms at all, but for some the extra bone can cause a painful bump that rubs on the insides of shoes. It can also affect the two tendons and the ligament that run along the side of the foot, which can be painful. It is most likely to cause problems in adolescence and is often related to having flat feet. It can also be more common in people who do a lot of exercise and activity.

Treatment

There are various options for treating an accessory navicular:

Non-surgical treatment

To start with, we always try to treat an accessory navicular without any surgery, as this is often successful. Non-surgical treatment involves avoiding sports and activities that make your child's symptoms worse. Your child can try wearing custom-made insoles (orthotics) to take pressure off the painful area.

We may also recommend two weeks of rest, with the leg in a below-knee plaster cast. This can help to rest the inflamed area.

Operation

If non-surgical treatments haven't helped, we may recommend a straightforward operation to remove the extra bone.

Before the operation, your child will be given a general anaesthetic (medicine given to make them go to sleep). The anaesthetist will discuss with you the possible complications of your child having an anaesthetic.

The surgeon will make a small surgical cut over the bump on the inside of the foot and take out the extra bone. They will repair the tendon and apply a cast or splint.

After the operation

Your child may need to stay in hospital for one night. Before your child goes home, we show them how to use crutches to get around. Most children will need to use crutches for up to two weeks after the operation, or until they are comfortable walking.

At home, your child can take pain relief, such as paracetamol, if they need to. In the first week after the operation, they should keep their foot lifted on pillows whenever they are resting.

Possible complications

As with any medical procedure, there is a possibility that complications may arise after your child's operation.

Possible complications include:

- bleeding during or after surgery
- scarring due to the surgical cut
- infection of the surgical wound (we can usually treat this with antibiotics but in less than 1% of cases, we may need to do another operation)
- loss of feeling at the operation site (this can be temporary or permanent)

Speak to your child's nurse or doctor if you have any questions or concerns about these complications.

Contact us

Nurse practitioners:

Mobile: **07584 402438**

Telephone: **023 8120 4991** (answer phone)

G3 Ward:

Telephone: **023 8120 6486**

If you need a translation of this document, an interpreter or a version in large print, Braille or on audiotape, please telephone **023 8120 4688** for help.

www.uhs.nhs.uk/childrenshospital