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Morton's Neuroma / Inter Digital Neuralgia - A Patient Guide

What is it?

Irritation and swelling of a nerve to the toes, causing pain around the foot. It is not a true neuroma (a nerve tumour) but pain from the nerve, better described as inter digital neuralgia.

What causes it?

Repetitive compression of the common digital nerve to the toes. This may be caused by wearing footwear (high heels, narrow toe box, thin soles) or activities involving repeated impact to the balls of the feet. Often however, the exact cause is difficult to identify.

What are the symptoms?

Pain, numbness and tingling on the sole of the foot, relived by resting and removing footwear, but made worse on walking and standing. The pain may radiate to the toes and be burning in nature and the toes can feel numb. The condition commonly affects the 3rd and 4th toes and sometimes the 2nd and 3rd toes, but can occur between any of the toes.

Who are affected?

It is more common in women (due to footwear choices) and more common between 25 and 50 years of age.

How is it diagnosed?

Mr Gordon will take a thorough history and examination and perform radiographs (x-rays) and this is normally sufficient to make a diagnosis. Sometimes it may not be clear as there are a number of other conditions which can present in a similar way. If this is the case, then an ultrasound scan or MRI scan may be required.

How is it treated?

The first way is to wear sensible footwear! A soft, lace-up, wider toe box shoe, with a low heel and cushioned sole. This will allow the toes to spread out and reduce pressure on the nerve. An insole with a metatarsal dome can help to elevate the balls of the feet and reduce pressure on the nerve. An injection of steroid with local anaesthetic can relieve symptoms in 30 % of patients.

Surgical treatment

If non-surgical methods do not help, the nerve can be either released by cutting a ligament or removed with an operation. Each technique will be discussed with you by Mr Gordon. The operation has an 80 % success rate for relieving pain. Permanent numbness on the side of the involved toes will result if the nerve is removed, but this does not affect everyday living. Mr Gordon performs this as a day case procedure.

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What are the complications of surgery?

Infection-as with any cut on the skin (very small risk)

Stump neuroma-persistent pain at the cut end of the nerve (5% risk)

Painful scar (very small risk)

What should I expect after surgery?

You will go home the day of surgery with a bandage and a post operative sandal on the foot. You can put as much weight as is comfortable through the leg. It is important to follow the Post Operative Instructions (below). You will be given some oral pain killers over the next few days, as required. You will be seen at around 2 weeks post operatively in clinic by Mr Gordon for removal of sutures.

Post Operative Instructions

Foot Elevation-This is extremely important for wound healing, pain and swelling control. You should have the foot at the level of the chest for 23 hours in the day for the first 3 days. After this, until 2 weeks post operatively, it should be kept elevated for 50 % of the time when awake.

Bandage Care-The bandage can be removed by you after 48 hours, leaving on the remaining waterproof dressings.

Smoking-Refrain from smoking 2 weeks before and after your operation.

Return to Work-For a desk job, when you feel able as long as you comply with the post operative instructions. For a job involving being on your feet most of the time, 3-4 weeks. This can be discussed with Mr Gordon in clinic.

Driving-You need to be able to control the vehicle in an emergency. Can you stamp your foot down on the ground? For left sided surgery and no clutch is required, driving is probably safe after 2 days post operatively. For right sided surgery, driving is probably safe at 2 weeks post operatively, once in a normal shoe. If you are unsure, please ask Mr Gordon.

Return to Sport-Once the wound has healed at 2 weeks, swimming can be commenced and also light exercise such as bicycle spinning (low resistance). At 4 weeks, more strenuous activities can be started.

Post Operative Problems

If any of the following occur, please contact the hospital ward:

Bleeding that does not stop with rest and elevation

Increasing pain despite rest, elevation and pain killers

Increasing redness or discharge from the wound