

treatment alone may not resolve the problem if the above treatments have not been considered.

- **Surgery** – An operation is the final option. Your GP would need to refer you to Orthopaedics for consideration of this if all other treatments have been unsuccessful.

If you have any questions about the information in this leaflet, please contact Podiatry Services.

Further information about the service and how to manage a range of foot health problems yourself, can also be found on our website: www.livewellsouthwest.co.uk/project/podiatry

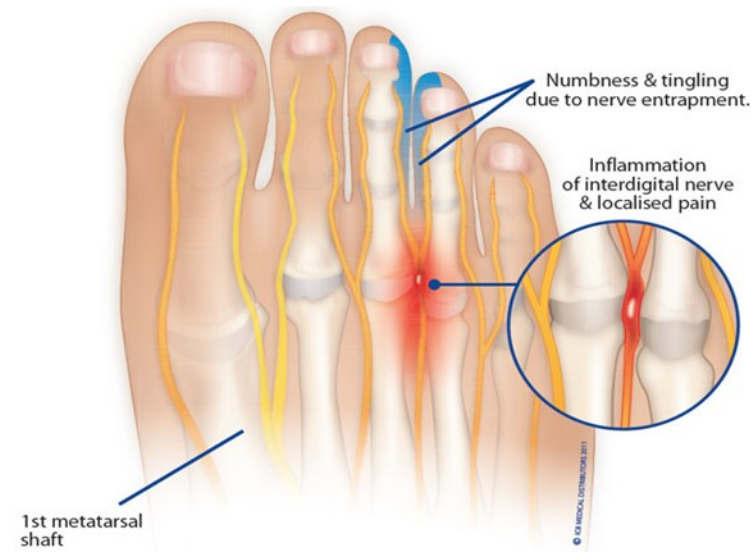
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Podiatry Services Patient Information Leaflet



Morton's Neuroma & Intermetatarsal Bursitis

(March 2023 V1)

What Is This Condition?

This condition occurs because of repetitive friction or pressure to the nerve or the bursa that runs between your toes. The symptoms can be described as electric shock type sensations, numbness or tingling which affects the toes and forefoot; it can also feel sore/bruised and a feeling of walking on a pebble or a lump. It most commonly affects the 3rd and 4th toes but can affect all toes.

Risk Factors for Developing The Problem

- **Footwear** – Certain types of footwear can have a significant impact. High heeled shoes force increased pressure through the forefoot. Tight or narrow footwear will compress the nerve or bursa. Thin soled or worn shoes will increase the pressure to this area. Even tight hosiery can be contributory.
- **Wide foot types**- such as bunions, plus inadequate footwear can squeeze the forefoot bones together which irritates the nerve or bursa
- **Repeated trauma** – Running, kicking, or changing direction e.g. racket sports, or football
- **Weight** – The risk increases with higher body weights.
- **Tight, stiff, or weak calf muscles**. This is known to increase pressure at the forefoot when walking/running.

Treatment

Footwear

Changing your footwear often resolves this condition without any further treatment being needed. Make sure your shoes are not too tight or narrow. A good test is to draw around your foot on the back of a cereal box, cut it out and then see if that cardboard cut-out will fit

into your shoe easily without being crumpled up. Another method is to remove the manufacturers insole from your shoe and stand on it; if your foot sits over the edges at the forefoot then cease using these shoes.

- Cease using old or thin-soled shoes.
- Avoid wearing high heels while you have this condition.
- Some shoes can be professionally stretched to make them wider at the forefoot. Materials such as soft leather are amenable to this.
- Loosening your shoelaces at the forefoot can help the shoe to spread wider around your forefoot. Also try leaving the lower eyelets lace free to help the shoe widen at the forefoot.

Stretching

Exercises to stretch the muscles at the back of your legs (calf) can in time help to reduce pressures on the front of your feet (see the enclosed leaflet)

What If This Does Not Help?

- **Foot Orthoses**- You could try finding an over-the-counter insole with a metatarsal pad incorporated which can help to reduce forefoot pressure at the site of your symptoms. A podiatrist can assess your foot and determine if specialised foot orthoses (insoles) can help to offload the area.
- **Shoe modifications**- Podiatry may be able to help with some of the shoe modifications mentioned above.
- **Steroid Injection** – For some people, following all the above conservative measures may not resolve the problem. The next step could be to consider a steroid injection which can help to reduce the swelling which is pressing on the nerve. Having this