

## Our highly skilled podiatrists

are registered with the Health Care Professionals Council (HCPC) and members of the College of Podiatrists. The practice is accredited by the College of Podiatrists (CoP).

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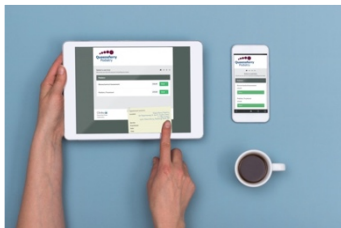
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## Professional and caring podiatrists

## Morton's Neuroma



## Treatment Advice

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## What is a Morton's neuroma?

Morton's neuroma is a common, benign growth affecting the base of the toes, usually the third and fourth toes.

The cause of this irritation is not exactly known, but it may be the metatarsal bones compressing the nerve when the gap between the bones is narrow. This causes the nerve to thicken.

Women are affected much more than men and the condition usually only affects one foot.

## What causes a Morton's neuroma?

Wearing shoes that have a pointy toe box or high-heeled shoes that cause the toes to be forced into the toe box.

People with certain foot deformities e.g. bunions, hammertoes, flatfeet or more flexible feet are at higher risk for developing a neuroma.

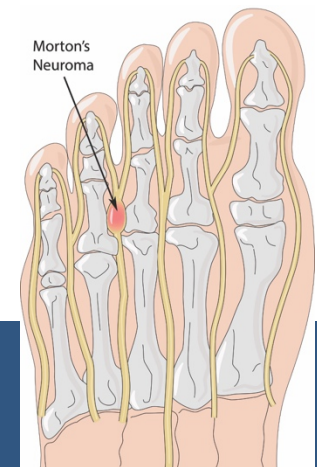
Other potential causes are activities that involve repetitive irritation to the ball of the foot, such as running or court sports.

An injury or other type of trauma to the area may also lead to a neuroma.

## Symptoms?

You may have one or more of these symptoms:

- tingling in your toes
- burning or numbness in your toes
- pain
- a feeling as if you're standing on a pebble in your shoe
- a feeling your sock is bunched up



*Morton's neuroma involves a thickening of the tissue around one of the nerves leading to your toe. If the pain is particularly bad, an ultrasound test can be given to confirm the diagnosis before deciding on further treatment.*

## What can help?

- **Padding and orthotics:** Padding techniques provide support for the metatarsal arch, thereby lessening the pressure on the nerve and decreasing the compression when walking. Orthotics can be provided by your podiatrist to provide the support needed to reduce pressure and compression.
- **Icing:** Placing an icepack on the affected area helps reduce swelling.
- **Activity Modifications:** Activities that put repetitive pressure on the neuroma should be avoided until the condition improves.
- **Shoe Modifications:** Wear shoes with a wide toe box and avoid narrow-toed shoes or shoes with high heels.
- **Medications:** Anti-inflammatory drugs (NSAIDs), such as ibuprofen, may be recommended to reduce pain and inflammation.
- **Injection Therapy:** Treatment may include injections of cortisone, local anaesthetics or other agents.
- **Manual Manipulation:** Massage and mobilisation are often combined with manipulation and are used to reduce muscle spasm, soreness, or tightness.
- **Surgery:** If other therapies have not worked and symptoms persist after 9-12 months, then surgery may be considered. It is usually effective, but can result in permanent numbness in the affected toes