

# Metatarsalgia

#### **INFORMATION**

The term refers to pain under the metatarsal heads.

#### **FEATURES**

- Pain on walking or prolonged standing.
- Evidence of callosity formation under the metatarsal heads.
- Usually accompanied by lesser toe deformities such as hammer toes, mallet toes and tight Tendor Achilles.
- Also may be present in association with pes cavus, hallux valgus and inflammatory arthritis, i.e.: RA
- MUST BE distinguished from pain between the metatarsal heads, shooting into the web spaces due to a Morton's Neuroma.

#### **EVIDENCE**

- Metatarsalgia due to pes cavus or idiopathic causes responds in some cases to weight relieving inserts or physiotherapy.
- Metatarsalgia secondary to other causes such as Hallux Valgus responds to correction of the underlying cause.
- Metatarsalgia secondary to inflammatory responds to orthotics in the early stages but fixed deformities require surgery.

#### **INITIAL TREATMENT**

- Once diagnosis has been made, referral to orthotics for weight relieving inserts.
- Referral to physiotherapy for stretching exercises for the Tendo Achilles.
- In the presence of Hallux Valgus, inflammatory arthritis, refer to secondary care.

#### **FURTHER MANAGEMENT**

If no response or inadequate response within three months of orthotics, discuss the option of referral to secondary care with patient

### Referral should only be made IF

- Patient understands that referral is likely to be for surgery
- Patient is fit to undergo surgery
- Patient understands that their operation will be carried out within 18 weeks and is able to commit to that timescale

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