

A nerve has become irritated in between your metatarsal heads. There is often associated thickening of the nerve or the tissues around it. Sometimes the inter-metatarsal bursae adjacent to the nerve are inflamed - this can give similar symptoms with similar causes and treatments.

Symptoms:

- Pain in the ball of your foot
- A feeling that there is a pebble in your shoe
- A click with or without associated pain
- Pain that shoots or radiates down into the toes or up into the foot
- Tingling, burning, shooting sensations are all common
- The pain may worsen with high heels or narrower shoes
- The pain may improve with no shoes, wider shoes or massaging your feet
- The pain progressively worsens over time

Causes:

Pressure is almost always the cause of a neuroma. Tighter shoes and high heels are common causes. Dancers place increased strain on their forefoot and are therefore susceptible. Foot mechanics may be an issue - you may be walking in a way that overloads the central forefoot.

Treatment:

At Penn Farm Podiatry, we have a stepped treatment plan. We aim to treat you using most conservative method possible, but move through the steps until the pain resolves. Your podiatrist will discuss with you the appropriate step to begin at.

Step one: GOOD FOOTWEAR CHOICES

Wider shoes and shoes with a lower heel (around half or one inch is reasonable) will help milder cases. Wearing shoes with a fastening mechanism - laces, a buckle or a strap - will help. This is because a wide fitting slip on shoe will allow your foot to shift forwards in the shoe, resulting in a squashed forefoot and a gap behind your heel (this is why people who wear ballet flats or similar slip on shoes often end up buying them too small).

Step two: PADDINGS AND SIMPLE INSOLES

A metatarsal dome can lift and separate the metatarsal heads, reducing pressure on the nerve by increasing the inter-metatarsal space. Usually, your podiatrist will attach one to your foot or shoe temporarily and, if it proves helpful, a permanent change will be made. This could include modifying existing insoles, manufacturing a simple insole or gluing the metatarsal dome into summer sandals. If the metatarsal dome doesn't help, there are other types of paddings that can be trialled.

Step three: ADDRESSING YOUR MECHANICS

The mechanics of your foot and lower limb can be a contributing factor to your neuroma. For example, people with "flat feet" sometimes don't function properly through their big toe. This can result in overloading of the central forefoot area, because the weight isn't transferring through the foot properly.

Your podiatrist will recommend a biomechanical assessment and you will be issued with temporary or off the shelf devices, or cast for custom made orthoses. If you have an existing pair of orthoses it might be possible to modify rather than replace them.

Step four: STEROID INJECTIONS

These can be very helpful both to confirm the diagnosis and to get things to settle down. Your podiatrist can explain this in detail, but it is important to note that you will be unable to drive home afterwards and will need to reduce activities for up to a week afterwards.

Step five: SURGERY

If the symptoms have not settled despite conservative treatment, you may be referred for surgical intervention.