

MORTON'S NEUROMA

A Morton's neuroma is a nerve that becomes swollen and inflamed between the bones of the forefoot. Although neuroma typically means 'nerve tumour', in this case it refers to the enlargement of the nerve. The swelling and inflammation arises from compression of the nerve underneath the bones of the ball of the foot, leading to pain in that area and possibly in the toes. The pain may sometimes be absent or minimal. Other symptoms include numbness in the toes, and a marble-like sensation around the ball of the foot, like there is a pebble in the shoe.

Risk factors contributing to the development of Morton's neuroma include local compression due to tight or high-heeled footwear, people who participate in activities and sports such as jogging and running, skiing and rock climbing, and patients who have foot deformities such as bunions and hammertoes. The condition tends to get worse with time and repeated injury causes the nerve to become larger, resulting in it becoming easily injured.

NON-OPERATIVE MANAGEMENT

A Morton's neuroma may be treated with non-surgical measures such as modifying shoe wear by wearing wider shoes and avoiding high heels or tight shoes to enable more room for the bones to spread out. Using an insole with a metatarsal dome or foot pads help to reduce pressure on the nerve. A cortisone injection around the nerve may provide relief by reducing inflammation and swelling. Other options such as weight loss, physiotherapy, and using simple analgesia and non-steroidal anti-inflammatory drugs (NSAIDs) may contribute to relieving pressure and pain associated with this condition. Non-surgical treatment may or may not improve symptoms. Alternative modalities include shock wave therapy or thermoablation.

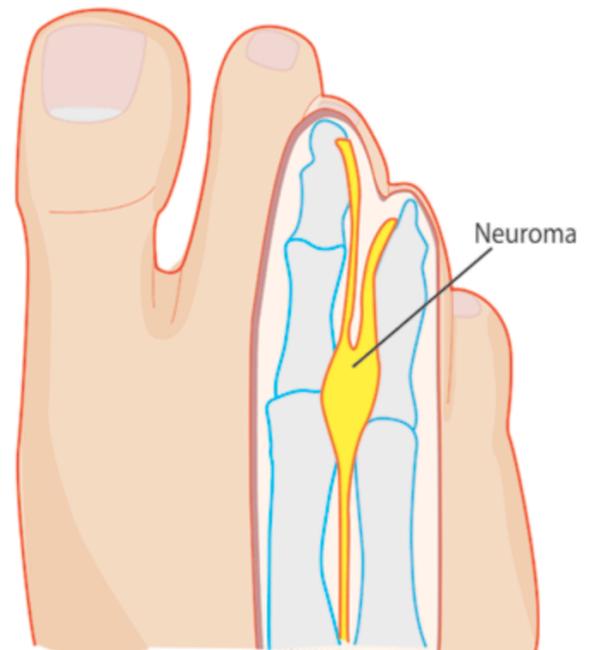
OPERATIVE MANAGEMENT

Surgery can help relieve pain and improve the functioning of the foot. A Morton's neuroma is excised by making a cut on top of the foot between the metatarsal bones. The nerve is then identified and a short section of it is removed. Since the surgery involves removing a nerve, there will be permanent numbness in the toes. This does not usually cause too much concern and the patient notices it less with time.

POST-OPERATIVE MANAGEMENT

After the operation you will have a bulky dressing on your foot, which you must keep clean and dry for two weeks until your first appointment with the surgeon. When resting keep your leg elevated as much as possible to reduce swelling.

Foot surgery without appropriate pain relief can be uncomfortable. While the operation is done under general anaesthetic, a local anaesthetic block is usually performed, which provides pain relief for 6-8 hours. You should wake up from surgery with minimal pain. When the block wears off you can take simple oral pain relief. It is important to start taking your oral pain relief prior to the block wearing off as once the pain becomes intense, it can become difficult to manage.



COMPLICATIONS

No surgery is risk free. The risks and complications will be assessed and discussed with you. There is always a small risk of infection, blood clots and anaesthetic problems with lower limb surgery and measures are taken to reduce these. Specifically, you will have numbness in the webspace and the inner margins of the toes, which the nerve supplied. Additional complications include swelling, bruising, worsening of pain, and although rare, a recurrence of Morton's neuroma. Occasionally, the end of the nerve that has been excised can become trapped or inflamed causing pain. Further surgery may be required to treat this.

RECOVERY TIMES

Hospital stay	1 night
Rest & elevation	10 days
Crutches/Frame	1 – 2 weeks
Time off work	
- Seated	3 - 4 weeks
- Standing	6 – 8 weeks
- Lifting/Carrying	8 – 12 weeks
Foot swelling	12 weeks
Shoes	
- Wide	6 – 12 weeks
- Normal	12 weeks
- "Fashionable"	Up to 6 months
Result times (pain relief & function)	
- Good	3 months
- Better	6 months
- Best	12 months

This brochure is a brief overview of the surgical management of Morton's neuroma and not designed to be all-inclusive. If you have any further questions, please do not hesitate to contact your surgeon.