

Forefoot Pain

The forefoot (or ball of the foot) is made up of many small bones, muscles ligaments, tendons and other body tissues. This makes pain in this area complex to diagnose.

A diagnosis must be carefully made using a thorough history and direct questioning. An expert knowledge of the anatomy of the forefoot allows an in-depth examination and the injured structure can be identified.

Morton's Neuroma is a common cause of forefoot pain, usually characterised by shooting, burning sensations from the ball of the foot extending into the toes. A neuroma normally develops between 3rd and 4th metatarsal head from increased pressure on the nerve sheath. Usually due to a collapsed metatarsal arch and tight fitting footwear often makes it worse. Treatment may involve avoiding aggravating footwear, stretching the toes and re-creating the metatarsal arch to offload pressure from the aggravated neuroma. If conservative treatment is not successful this would suggest the neuroma is very large in size, then ultrasound-guided cortisone injection, nerve ablation or neuroma surgery may be required.

Fat Pad Atrophy means that the cushion of fat underneath the ball of your foot has become thin or even moved. This fat pad provides support and shock absorption for your foot. As we get older this fat pad reduces and so does the cushion and support it offers which can lead to corns, callouses and foot pain to develop.

Hammer/Claw Toes form because your foot is trying to grip onto the ground excessively, often to gain more balance. Your toes will be forced to grip if the general foot structure is not working properly, which may lead to forefoot pain. Conservative care will stretch, strengthen and stabilise your muscles and toes for easier, more comfortable walking.

Plantar Plate Disruption Plantar plate tear/sprain is seen in a broad spectrum of patients, however is more common in ladies in their 40-50's. It is also seen in highly active men and women who perform high impact sports such as running, tennis, netball etc.



Capsulitis is an inflammation of a joint capsule causing forefoot pain. This often occurs at the 2nd metatarsal-phalangeal joint (joint where 2nd toe meets 2nd metatarsal). Enormous load goes through the metatarsal joints during toe-off phase of gait, and in some people the joints can become aggravated and inflamed.

Sesamoiditis is an irritation of the sesamoid bones, which are 2 tiny bones within the tendons that run to your big toe. Your sesamoid bones are active every time you push off against your big toe, and can become quite irritated and inflamed.

Stress Fracture is a small fracture in the bone, due to repetitive loading. Any activity that places high impact stress on the foot can lead to a foot stress fracture – for example running, tennis, netball, football.

Intermetatarsal Bursitis A bursae is a fluid-filled cushioning sac. There are multiple bursae located in the forefoot area, but the bursae in between the metatarsals is a common cause of pain (intermetatarsal bursitis).

Metatarsalgia is a general umbrella term for forefoot pain beneath the ball of the foot, or the area just before the toes.

Management is directed towards targeting the cause of the condition, and measures put in place to offload and distress the affected region. Sometimes semi-immobilisation is required in a short leg pneumatic walker (or soft cast), but more often it is as simple as footwear modifications and in shoe orthoses.

S-T-R-E-T-C-H Of The Month Soleus Stretch

1. To stretch deep calf muscles, stand with the left foot in front of the right but apart (ie step stance) with the toes pointing forward.
2. Bend both knees until you feel a stretch at the base of the calf.

Remember to maintain a neutral foot position ie do not allow the arch of the foot to collapse or roll inwards and make sure that your knee drops over your middle toe, not the big toe.



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