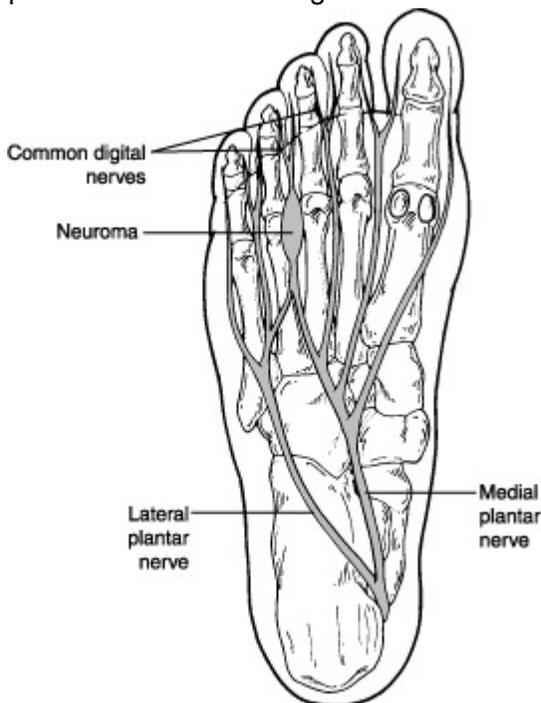


## Morton's Neuroma

### What is a Neuroma?

A neuroma is a thickening of nerve tissue that may develop in various parts of the body. The most common neuroma in the foot is a Morton's neuroma, which occurs at the base of the third and fourth toes. The thickening, or enlargement, of the nerve that defines a neuroma is the result of compression and irritation of the nerve. This compression creates swelling of the nerve, eventually leading to permanent nerve damage.



### Symptoms of a Morton's Neuroma

If you have a Morton's neuroma, you will probably have one or more of these symptoms where the nerve damage is occurring:

- Tingling, burning, or numbness
- Pain
- A feeling that something is inside the ball of the foot, or that there is a rise in the shoe or a sock is bunched up.

The progression of a Morton's neuroma often follows this pattern:

- The symptoms begin gradually. At first, they occur only occasionally, when wearing narrow-toed shoes or performing certain aggravating activities.
  - The symptoms may go away temporarily by massaging the foot or by avoiding aggravating shoes or activities.
- Over time the symptoms progressively worsen and may persist for several days or weeks.
  - The symptoms become more intense as the neuroma enlarges and the temporary changes in the nerve become permanent.

### What Causes a Neuroma?

Anything that causes compression or irritation of the nerve can lead to the development of a neuroma. One of the most common offenders is wearing shoes that have a tapered toe box, or high-heeled shoes that cause the toes to be forced into the toe box.

People with certain foot deformities—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 racquet sports. An injury or other type of trauma to the area may also lead to a neuroma.

## Diagnosis

To arrive at a diagnosis, Dr. Sorensen will obtain a thorough history of your symptoms and examine your foot. During the physical examination, Dr. Sorensen will attempt to reproduce your symptoms by manipulating your foot. Other tests including MRI may be performed.

The best time to see Dr. Sorensen is early in the development of symptoms. Early diagnosis of a Morton's neuroma greatly lessens the need for more invasive treatments and may avoid surgery.

## Treatment

In developing a treatment plan, Dr. Sorensen will first determine how long you've had the neuroma and evaluate its stage of development. Treatment approaches vary according to the severity of the problem.

For mild to moderate cases of neuroma, treatment options include:

- **Padding.** Padding techniques provide support for the metatarsal arch, thereby lessening the pressure on the nerve and decreasing the compression when walking.
- **Icing.** Placing an icepack on the affected area helps reduce swelling.
- **Orthotic devices.** Custom orthotic devices provided by Dr. Sorensen provide the support needed to reduce pressure and compression on the nerve.
- **Activity modifications.** Activities that put repetitive pressure on the neuroma should be avoided until the condition improves.
- **Changes in footwear.** It's important to wear shoes with a wide toe box and avoid narrow-toed shoes or shoes with high heels.
- **Medications.** Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, help reduce the pain and inflammation.
- **Injection therapy.** If there is no significant improvement after initial treatment, injection therapy may be tried. Some injections simply reduce pain and inflammation. Other sclerosing injections are designed to destroy the nerve and eliminate pain, much like removing the neuroma in surgery.

## When is Surgery Needed?

Surgery may be considered in patients who have not received adequate relief from other treatments. Generally, the surgical approach is to remove the neuroma of the affected nerve.

The length of the recovery period will vary, depending on the procedure or procedures performed. Regardless of whether you've undergone surgical or nonsurgical treatment, Dr. Sorensen will recommend long-term measures to help keep your symptoms from returning. These include appropriate footwear and modification of activities that cause repetitive pressure on the foot.

