Metatarsalgia
Metatars (metatarsals), Algia (pain)

What is it?
Pain within the ball of the foot or forefoot, is known as Metatarsalgia. Pain may radiate into the toes.

As the forefoot supports our bodyweight during standing or exercise, metatarsalgia is common. It can be caused by injury, badly fitting shoes, excessive exercise or foot conditions such as bunions.

Pain symptoms may feel mild to severe and affect daily activities, work or exercise. Treatment is simple and starts at home by making changes to your lifestyle, performing exercises, using different shoes or insoles all without the need to see a GP or a specialist.

This information covers:

- Symptoms of metatarsalgia
- Causes of metatarsalgia
- Treating metatarsalgia
- Exercises
- When to see your GP, Emergency Department (A&E) or Podiatrist

**Symptoms of Metatarsalgia**
Discomfort can be mild to severe and described as:

- Pain felt underneath the toe joints, under the forefoot and into the smaller toes.
- Burning
- Shooting
- Pins and needles with numbness
- Sharp or aching pain
- A rucked up sock or pebble sensation beneath the foot.
- One or both feet may be affected

**Causes of Metatarsalgia**

- High-heeled narrow shoes increase pressure under the forefoot and stop toes from supporting bodyweight during standing or activity.
- Sudden changes in exercise increase strain upon bones, tendons and muscles.
- High arched, flat feet or stiff ankles may increase the risk of metatarsalgia.
- Arthritis, gout, bunions, bursitis, Morton’s neuroma, hammer toes and occasionally stress fractures may result in metatarsalgia.
- Diabetes, weight gain and age related changes may increase the risk of metatarsalgia

**Treatment of Metatarsalgia**

**Lifestyle**
Keep active and eat a healthy diet to help reduce unwanted weight gain. Sleep 7-8 hrs+ each night as pain is worse without adequate sleep.

Swap high impact activities such as running for low impact exercise like swimming or cycling. Increase exercise gradually to allow your body to adapt and become stronger. Take rest breaks if you stand a lot.

**Pain relief** (Always ask your pharmacist before taking medication)
Paracetamol can help mild to moderate pain. Ibuprofen is for severe pain and swelling, avoid taking if you have diabetes, stomach complaints or cardiovascular problems. Ice the painful area for 10 minute periods. Place a towel between the skin and ice to prevent ice burns and skin damage.

**Footwear**
Shoes should be well cushioned, have low heels and be wide enough for all toes to move. A stiff soled shoe can reduce metatarsalgia, but experiment to find your preferred comfortable option.

**Insoles / pads**
Insoles are a cheap and effective way to change how feet absorb pressure. Insoles with arch and metatarsal support (metatarsal dome pads) are effective for metatarsalgia. These can be bought cheaply online, from chemists or sports shops.

**Skin problems**
Hard skin, verruca or skin cracks can be a cause of metatarsalgia. Hard skin should be applied with daily moisturising cream and regular use of a foot file, alternatively contact a local podiatrist for treatment. (This is not available on the NHS unless you have a serious medical problem such as diabetes)
Exercises
These may reduce pain and should be performed daily before seeking specialist opinion.

Calf stretches

AIM: Improve ankle motion and reduce foot pressure during walking

1. Lean against a wall.
2. Keep feet straight and heels flat to the ground.
3. Hold for 30 - 60s. Swap feet and repeat.
4. Avoid bouncing forwards and backwards.

Repeat 5 times /day
Perform until no stiffness is felt within the calf.

Foot Strengthening

AIM: Strengthen muscles in the foot which move the toes and keep them straight

1. Curl toes downwards and hold for 15-30s
2. Bend toes upwards and hold.
3. Spread toes sideways and hold.
4. Squeeze toes together and hold.

Repeat daily and frequently

What if pain isn’t getting better?
See a GP if:

- You have a very high temperature or feel hot and shivery
- Your groin feels tender and painful (swollen glands), this can be a sign of infection
- Pain is severe or stopping you from work and normal activities
- Pain is getting worse or keeps coming back
- Pain hasn't improved after treatments.
- You have tingling or numbness in your feet
- You have diabetes - foot problems can be more serious if you have diabetes

Go to the Emergency Department (A&E) if you had an injury and feel:

- Severe pain in the ankle or foot
- Faint, dizzy or sick from pain
- You heard a crack or grinding noise during trauma
- Unable to walk more than 2 or 3 steps
- Your leg, ankle or foot has changed shape
- You have developed a red, hot or swollen foot in the presence of Diabetes

Sources of information
The Health and Care Professions Council - (podiatrists register) - www.hcpc-uk.org
The College of Podiatry - www.cop.uk
Hand hygiene
The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats
If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4500 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference
The following clinicians have been consulted and agreed this patient information:
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ESHT Podiatry

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