Lesser Toe deformities

Problems with the small toes

What are they?
The small toes are important for walking; they help in pushing the foot off the floor. They share this role with the big toe and the ball of the foot. Sometimes they lose their straight shape and can become floppy or stiff. They are commonly known as clawed, mallet or hammered toe deformities, but they may also under or overlap adjacent toes.

They can be a concern due to their shape and become painful affecting your daily activity, work or exercise. Loss of sensation may mean you do not feel pain, this is common in diabetes.

Treatment is simple and starts at home by making changes to your footwear, lifestyle, exercises, using insoles or toe spacers all without need to see a GP or a specialist.

Why do they become deformed?
Toes deformities occur when pressure upon toes is stronger than the joints, ligaments and tendons can resist.

Injury, medical conditions such as Rheumatoid Arthritis create weakness of the foot muscles, these then lose the ability to work in synergistic balance with other muscles. Some muscles may pull harder than others, causing toes to bend abnormally.

Sometimes the joints and ligaments underneath the ball of the foot become weak or injured, allowing the toe to drift or splay apart.

Poorly fitting and tight shoes press upon toes restricting normal movement and high heels may force toes into the tip of the shoe.

Short or long toes are common, or happen from surgery, but may predispose to increased pressure and deformity.
This information covers:

**Symptoms of lesser toe deformities**

**Causes of lesser toe deformities**

**Treating lesser toe deformities**

**Exercises**

**When to see your GP A&E or Podiatrist**

**Symptoms of Lesser Toe deformities**

- Structural and postural change of the smaller toes
- Pain underneath the ball of the foot
- Pain to the top, underneath, sides and end of toes
- Rubbing of the toes may cause blisters, hard skin or open wounds
- Pain wearing shoes
- Change in the appearances of toenails
- One or multiple toes may be affected.

**Causes of toe deformities**

- High-heeled and narrow shoes increase pressure upon toes, causing deformity and skin lesions.
- Weakness of muscles, tendons and ligaments that stabilise and move toes, cause muscle imbalance and toe deformity.
- High arched, flat feet or stiff ankles may increase the risk of toe deformities
- Injury to the ball of the foot or toes
- Weight gain, low exercise levels and age related changes may increase the risk of problems with toe deformities
- Medical conditions such as arthritis, abnormal neurology, diabetes or poor circulation may cause and aggravate existing toe deformities.
Treatment of lesser toe deformities

Lifestyle
Keeping active and eating a healthy diet helps to avoid 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.

Footwear
Shoes should be well cushioned, have low heels and be wide enough for toes to move comfortably. A stiff soled shoe can reduce pain under the ball of the foot, but experiment to find your preferred style.

Insoles / pads
Insoles with arch and metatarsal support (metatarsal dome pads) are helpful for pain under the ball of the foot. These can be bought cheaply online, from chemists or sports shops.
Gel pads can be helpful for pain under the ball of the foot
Silicone gel toe supports are useful for over / underlapping toes and hard skin upon the ends of toes. (See below)

Skin problems
Hard skin should be applied with moisturising cream daily 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 or experience open wounds on your feet)
Exercises
These may reduce pain and should be performed daily before seeking specialist opinion.

Calf stretches
AIM: Improve ankle motion and reduce pressure under the ball of foot 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.
5. Repeat 5 times / day over 3 months

Strengthen the foot
AIM: Strengthen muscles in the foot

1. Curl toes downwards and hold this position for 15-30s.
2. Bend toes upwards and hold for 15-30s.
3. Spread all your toes and hold for 15-30s.
4. With your foot on the floor, raise the arch of your foot whilst keeping all toes straight.
5. Repeat frequently until easy to perform

Toe Mobility
AIM: Improve and maintain joint movement

1. Gently bend toes downwards until resistance
2. Hold for 15-30s
3. Repeat frequently
4. Stop if painful
What if pain isn’t getting better?

- If pain persists despite advice and attempts to self-manage, it may be necessary to see a podiatrist
  
  You may be able to request a consultation or ask your GP

- If non-surgical measures do not settle symptoms or concern, it may be necessary to see an Orthopaedic Foot & Ankle Consultant. They can discuss surgical management. This may come with significant risks, e.g., pain, infection and reoccurrence. It will impact upon everyday activities e.g., inability to drive or exercise for some weeks

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 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
https://www.bofas.org.uk/Patient-Information/Lesser-Toes
Hadlow, G. 2018. Lesser toe pathway. ESHT iMSK
http://orthodesignbc.com/common-foot-pathologies/toe-deformities/

Important information
This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments
We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4500 Ext: 734731 or by email at: esh-tr.patientexperience@nhs.net

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

References
The following clinicians have been consulted and agreed this patient information:
Graeme Hadlow (East Sussex Healthcare NHS Trust) MSK Advanced Practitioner

The Clinical Specialty/Unit that have agreed this patient information leaflet:
Podiatry ESHT

Next review date: May 2023
Responsible clinician/author: Graeme Hadlow East Sussex Healthcare NHS Trust

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