Treatments

All conservative treatments begin with the shoes that you wear. Make sure that your shoes are:

- Wide enough across the ball of the foot and toe area, so that there is no pressure on the big toe and its joint.
- The shoes must be long enough in order to prevent pressure on the tip of the toe.
- The heel of the shoe should be no higher than 1”.
- The sole of the shoe should be rigid, in order to reduce bending of the big toe when walking.
- Reduce pressure on the big toe joint. Use a soft gel pad to cushion the ball of the foot and reduce pressure on the big toe joint.
- Off the shelf Orthotics may work if you have flat arches.
- Ice.
- Gentle massage with a topical pain reliever can help to provide comfort.
- Simple painkillers such as Paracetamol or Ibuprofen. (What you would take for a headache)
- Ultrasound therapy may work for a short period.
- Steroid injection.
- Surgery.

If you discover any problems with your feet, contact your Podiatry Department or GP immediately. If they are not available, go to your nearest accident and emergency department. Remember, any delay in getting advice or treatment when you have a problem can lead to more serious problems.

Individual advice

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Equality Statement

At South Warwickshire NHS Foundation Trust we are fully committed to equality and diversity, both as an employer and as a service provider. We have a policy statement in our Equality Strategy that clearly outlines our commitment to equality for service users, patients and staff:

You and your family have the right to be treated fairly and be routinely involved in decisions about your treatment and care. You can expect to be treated with dignity and respect. You will not be discriminated against on any grounds including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation.

You have a responsibility to treat other service users, patients and our staff with dignity and respect.

Our information for patients can also be made available in other languages, Braille, audio tape, disc or in large print.

PALS

We offer a Patient Advice Liaison Service (PALS). This is a confidential service for families to help with any questions or concerns about local health services. You can contact the service by the direct telephone line on 01926 600 054 by email: Pals@swft.nhs.uk or by calling in person to the PALS Office which is located in the Lakin Road Entrance of Warwick Hospital.
Hallux Rigidus and Hallux Limitus are terms that refer to different stages of the same foot problem.

**Terms:**
- **Hallux** refers to the big toe.
- **Limitus** refers to decreased motion of the joint. There is less than normal motion available. This is the **early stage**.
- **Rigidus** denotes a joint that is rigid... very little, if any motion is available. This is the **later stage**.

Hallux Rigidus/Limitus involves the 1st metatarso-phalangeal joint. This joint is located at the base of the big toe. Hallux Rigidus/Limitus causes pain and stiffness in the big toe, and with time it becomes increasingly harder to bend the toe. This is a progressive condition during which the toe’s motion decreases as time goes on. In the early stages, motion of the big toe is only limited, and at this point, the disorder is called Hallux Limitus. As the problem advances, the big toe's motion gradually decreases until it becomes rigid or frozen. At this point, the disorder is referred to as Hallux Rigidus. As motion becomes progressively limited, pain increases, especially when the big toe is extended, or pushed up.

### Early Symptoms/Diagnostic Signs (Hallux Limitus):
- Pain and stiffness in the big toe when it is pushed upwards, as occurs when we walk/run,
- Squat or stand on our tip toes.
- Swelling and inflammation of the joint, especially on the top of the joint.
- Discomfort in the joint that occurs when the weather is damp and cold.
- A feeling of "tightness" in and around the joint.

### Later Symptoms/Diagnostic Signs (Hallux Rigidus):
- Pain in the joint that is almost constant. May even be felt when resting and the shoe has been removed.
- Crepitus, ("grinding" feeling) in the joint when the big toe is moved up and down.
- A bump, or "hardness" can be felt on the top of the joint.
- Difficulty wearing shoes, especially high heels, due to the bone spur and stiffness of the big toe joint.
- Walking becomes so painful that we try to walk without bending the big toe. This can cause; limping, pain in other parts of the foot, as we try to throw our weight off of the big toe on to the adjacent foot structures.
- Pain in the knee, hip, and lower back due to changes in the way we walk.
- Weight gain due to lack of walking and exercise, because of these pains.

### Causes?
- **Repetitive Injuries** to the joint occur when the big toe is repeatedly jammed backwards, with force, against the joint cartilage. This retrograde pressure on the cartilage causes the cartilage to prematurely wear down and tear. Some of the most common causes of this type of injury include:
  - Frequent wearing of high heel shoes.
  - Wearing shoes that are too small.
  - Squatting for long periods of time.
  - Injury such as stubbing the big toe.
  - Improper running technique. Running on your toes, so that your heel does not touch the ground.
  - Dropping a heavy object on your big toe joint.
  - Inflammatory diseases such as rheumatoid arthritis or gout.

- **Overuse** – especially among people engaged in activities or jobs that increase the stress on the big toe, such as workers who often have to stoop or squat. Injury, such as stubbing your toe.
  - Age-related changes of the big toe joint, or osteoarthritis. Osteoarthritis, or degenerative joint disease, is the most common form of arthritis. It is due to the normal wear and tear that our joints undergo during our lifetime. This disease produces a gradual deterioration of the joint cartilage throughout our entire body, including the big toe joint.

- **Hereditary**
  - In some people, Hallux Rigidus runs in the family and is a result of inheriting a foot type that is prone to developing this condition.