



Midlands  
Orthopaedic Centre

# Trauma & Orthopaedics

Patient Information Leaflet  
Morton's neuroma



The Dudley Group  
NHS Foundation Trust

## Introduction

This leaflet is for patients who are considering surgery for a Morton's neuroma. It gives information on what happens during the procedure, and the risks and benefits of it.

## What is a Morton's neuroma?

It is a painful foot condition that affects one of the nerves between the toes. It is the result of a particular nerve becoming thickened due to pressure on the nerve itself.

## What causes it?

If the arch of your foot is weak, this can cause bones in the middle of your foot, called the metatarsal bones, to pinch the nerve. This can cause it to become inflamed and painful.

It may develop due to shoes that do not fit well and that press against the nerve. The condition is made worse in athletes who spin on the ball of their foot, such as golfers and tennis players.

## What are the symptoms?

You may first notice pain in the ball of your foot. You may feel like there is a stone in your shoe – this is a very common symptom. You may also have:

- Pain on one side of a toe and the adjacent side of the next toe.
- Pain when you squeeze your foot.
- Pain if you press between the bones of your foot.

## What is the treatment?

The treatments available include both non-surgical and surgical treatment. The type of treatment suggested to you will depend on how long you have had the condition and whether it is affecting your walking.

### Non-surgical treatment

This includes:

- a small insole for your shoe to support the ball of your foot
- anti-inflammatory tablets
- Steroid injection

If you are still having pain despite this treatment, and it is causing you problems with walking, your consultant may suggest that you have surgery to cut out the neuroma.

### Surgical treatment

The surgeon makes one or two small cuts on the ball or top of your foot and removes part of the nerve.

The surgery may be carried out using a local anaesthetic that numbs the area, or a general

anaesthetic, where you are asleep for the procedure. Your consultant will discuss this with you in more detail.

## **What are the benefits of surgery?**

If you are suffering pain or problems with walking from the neuroma, removing it by surgery should improve this. However, the benefits need to be weighed up against the risks of surgery.

## **What are the risks of surgery?**

There is always a small element of risk involved with any type of surgery. The main complications are as follows:

- Infection of the wound
- Swelling
- Wound problems
- Numbness
- Persisting symptoms
- The neuroma may re-occur, particularly if your shoes do not fit well

## **What are the alternatives?**

You do not need to have surgery and it will only be suggested if your neuroma is very painful and is affecting your walking.

## **What happens before the operation?**

You will be asked to come for a health assessment with a nurse, usually about one or two weeks before your surgery. This will determine whether there are any reasons why you should not have surgery.

During this health assessment we will:

- Check your suitability for anaesthetic.
- Give you information about the surgery and recovery process. It is important that you know what to do to help your recovery.
- Carry out investigations to ensure that you are fit and well to have the surgery.

A range of investigations will be carried out such as:

- A blood test, if you take certain medications.
- You may have an ECG – a heart trace test. This is nothing to be alarmed about, just a routine test to check your heart.
- Your blood pressure, pulse and weight will be recorded.
- You will be screened for MRSA – a nasal and groin swab will be taken to see if you have any evidence of infection.
- A finger prick test to check your blood glucose levels.

We will give you instructions about whether you need to stop eating and drinking before

your operation.

You will have the opportunity to ask any questions or discuss any problems you may have.

At this assessment, please tell us if:

- You are diabetic
- You have a cold, cough or any type of infection
- You take any medications and what these are. You may need to stop taking some of these for a short period of time before you have the operation.

## **What if I become ill before my operation?**

It is important that you tell us if you are not well enough to come in for the operation. Please ring one of the following numbers:

- Day Surgery Unit on 01384 456111 ext. 1886
- Pre-assessment Unit on 01384 456111 ext. 1849

Also, please ring us if you have any type of infection such as:

- a chesty cough, cold or throat infection
- skin problems such as a rash, cut or skin infection, especially if it is on the area that is to be operated on
- diarrhoea or you have been sick in the last 48 hours

If you are not sure and want to ask about this, please ring for advice.

## **What do I need to bring for my operation?**

Please bring a dressing gown, slippers and any medication you are currently taking. It is likely you will only be in hospital for the day but just in case you need to stay overnight, please bring an overnight bag with nightwear, toiletries etc. If you will have to stay overnight, we will tell you during the health assessment you have before your operation.

Please do not wear or bring any jewellery. However, you can wear your wedding ring.

Please do not wear any make up; or nail varnish or gel nails on your fingers or toes.

### **Personal property**

The Dudley Group NHS Foundation Trust and its staff cannot be held responsible for the personal property of patients or visitors.

You are advised not to bring valuable items with you. Where this is unavoidable, please note that the hospital cannot accept responsibility for your property unless it is handed to a staff member for safekeeping and an official receipt is obtained.

## What happens when I come for my operation?

When you arrive, you will be taken to an admission area. Here you will be seen by:

- a member of the surgical team who will explain the operation to you. If you are happy to go ahead with the operation, they will ask you to sign a consent form.
- the anaesthetist, if you are having sedation or a general anaesthetic.
- a member of the nursing staff. The nurse will check your blood pressure, temperature and pulse. They will talk through what will happen and check for your understanding of this. They will give you an approximate time for your operation.

Unfortunately, you may sometimes have to wait for a number of hours for your surgery. We do appreciate how difficult and inconvenient this might be and we try to minimise delays for all patients as much as possible.

The nurse will ask you to undress and put on a theatre gown shortly before your surgery. A nurse will take you to the operating theatre. A member of the theatre team will check your personal details with you. You will then be given the anaesthetic.

## What happens after the operation?

A nurse will monitor your blood pressure, pulse and temperature. They will observe your foot for colour, warmth and feeling. We will ask you if you have any pain and give you painkiller tablets if you need them.

Once you have had something to eat and drink, and have been to the toilet, you will be able to get out of bed on your own.

You will be given a special walking boot that has a plastic sole and Velcro fastening, as you will not be able to wear a shoe for some time (usually at least six weeks).

You will be able to go home when you are comfortable and have recovered from the anaesthetic.

## What happens when I go home?

If you go home the same day as the operation, you will need to have someone to care for you for at least the first 24 hours.

You must not drive yourself home. You will not be able to go home on public transport on your own. Therefore, you will need to arrange for someone to collect you and take you home.

The nurse who discharges you from hospital will give you a letter for your GP, a sick note if you need it and any medication that has been prescribed for you.

We will give you instructions on caring for your wound. You will need to keep your wound clean and dry. If you have any problems with your dressing, or any other queries, please contact:

**Russells Hall Hospital Day Surgery Unit** on  
01384 456111 ext. 1886 (7.30am to 8pm, Monday to Friday)

## When can I go back to work?

It is a good idea to wait until your stitches have been taken out, after about 14 days. If you do manual work, you may need to stay off a little longer. If you intend to return to work while you are wearing your walking boot, you may need permission from your employer, for health and safety reasons.

## Will I be able to drive?

It is very important that you check with your insurance company as to when you can drive again after surgery.

You will need to avoid driving until your stitches have been taken out. You should also make sure that you can sit in your car and press all the pedals without any discomfort. You should be able to do an emergency stop.

Do not drive if you have any discomfort that may distract you.

## What follow up care will I receive?

We will give you an appointment for:

- Your dressing to be reduced in size.
- Your stitches to be taken out about 10 to 14 days after your operation.
- A follow-up visit to see your consultant about six weeks after surgery.

## Can I find out more?

You can find out more from the following weblink:


### NHS Choices

<http://www.nhs.uk/conditions/mortonsneuroma/Pages/Introduction.aspx>



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 [dgft.midlandsorthopaediccentre@nhs.net](mailto:dgft.midlandsorthopaediccentre@nhs.net)

 01384 456111 Ext 4638

 [dgft.vfc.dudley@nhs.net](mailto:dgft.vfc.dudley@nhs.net)

 <http://www.midlandsorthopaediccentre.co.uk/>

 Please visit our [YouTube channel](#) to access some of our fracture patient information videos

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