

Bunions / Hallux Valgus – deviation of the big toe



A bunion (hallux valgus) is a deformity of the base joint of the big toe. The cause is not clear in many cases. The deformity may cause the foot to rub on shoes, which may cause inflammation and pain. Good footwear is often all that is needed to ease symptoms. An operation to correct the deformity is an option if good footwear does not ease symptoms.

What is a bunion?

When your big toe is angled towards the second toe, the deformity is called a bunion (hallux valgus). This causes a bump on the side at the base of the big toe. In addition there is often thickening of the skin and tissues next to the affected joint. The thickened skin and tissues may become inflamed, swollen and painful. Sometimes a fluid-filled sac (bursa) develops over the joint.

What causes bunions?

The underlying cause is a deformity of the joint at the base of the big toe. The deformity is called hallux valgus. In this deformity the joint develops a prominent sideways angle. Due to this deformity the bones of the big toe are pushed towards the smaller toes. The skin over the angled joint then tends to rub on the inside of shoes. This may cause thickening and inflammation of the overlying skin and tissues next to the affected joint.

In most cases it is not clear why a hallux valgus deformity develops. There may be some hereditary (genetic) tendency to have a weakness of this joint. In some cases it is associated with a joint problem such as osteoarthritis or rheumatoid arthritis.

However, whatever the underlying cause, wearing tight or badly fitting shoes tends to make the problem worse. Wearing such shoes puts extra pressure on the big toe joint and causes friction on the overlying skin.

What symptoms and problems are caused by bunions?

- Pain. You may then have difficulty walking due to pain.
- Inflammation and swelling at the base of the toe.
- The foot may become wide that it can be difficult to find wide enough shoes.
- You may get arthritis in the big toe.
- The second toe can become deformed.
- In severe cases, the big toe can push your second toe up out of place.

How can I manage my Bunions?

What is the treatment for bunions?

Around half of all bunion sufferers do not need surgery. Good footwear is often all that is needed.

Wearing good footwear does not cure the deformity but may ease symptoms of pain and discomfort. Ideally, get footwear advice from a person qualified to diagnose and treat foot disorders (podiatrist - previously called a chiropodist).

Advice may include:

- Wear shoes, trainers or slippers that fit well and are roomy.
- Don't wear high-heeled, pointed or tight shoes.
- You might find that shoes with laces or straps are best, as they can be adjusted to the width of your foot.
- Padding over the bunion may help, as may ice packs.
- Devices which help to straighten the toe (orthoses) are still occasionally recommended.

Orthotics

In other cases, a podiatrist can make an inner sole to go inside the shoe which may also help with symptoms. It is important to address any abnormalities in biomechanics (foot and lower leg posture during movement).

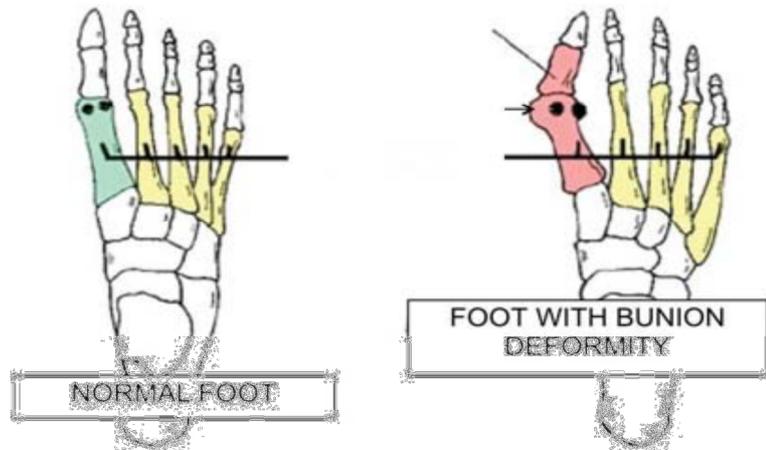
Medication

Painkillers such as paracetamol or ibuprofen may ease any pain. If the bunion develops as part of arthritis then other medication may be advised. A course of antibiotics may be needed if the skin and tissues over the deformity become infected.

Bunion Surgery

An operation may be considered if a change of footwear does not ease symptoms. The aim of the operation is to straighten the joint as much as possible and relieve pain. It is not usually done just to improve appearance. It can be done using a local or a general anaesthetic and you are usually out of hospital the same day.

The operation chosen by the specialist depends on the severity of the bunion, the shape of your foot, and other factors, such as if you have arthritis in the joint. There are many different types of operation which are used to treat bunions. These range from operations to trim parts of the joint, to a total artificial replacement of the big toe joint.



An operation is usually successful at easing symptoms, but not in all cases. It is not always possible to relieve the pain completely or make the toe perfectly straight. Your specialist will be able to advise on the pros and cons of surgery, and the success rate of the chosen operation. Continued pain, infection and the bunion returning are some of the complications of surgery of which you need to be aware. You will need to continue to wear sensible, wide-fitting shoes after the operation.

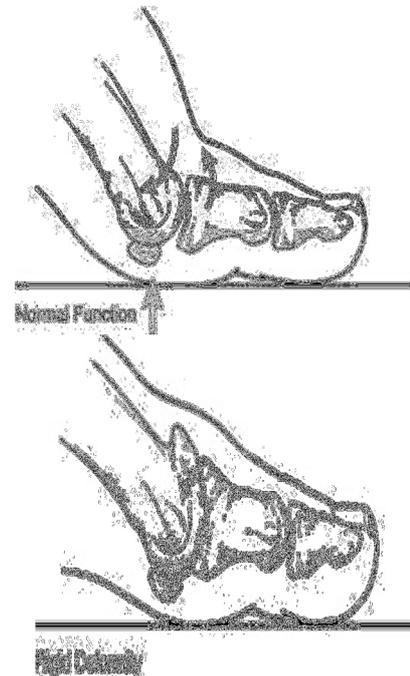
Stiff big toe / Hallux Rigidus

What Is Hallux Rigidus?

Hallux rigidus is a disorder of the joint located at the base of the big toe. It causes pain and stiffness in the joint, and with time it gets increasingly harder to bend the toe. ‘Hallux’ refers to the big toe, while ‘rigidus’ indicates that the toe is rigid and cannot move. Hallux rigidus is actually a form of degenerative arthritis.

Signs and symptoms include:

- Pain and stiffness in the big toe during use (walking, standing, bending, etc.)
- Pain and stiffness aggravated by cold, damp weather
- Difficulty with certain activities (running, squatting)
- Swelling and inflammation around the joint
- In advanced stages pain may occur even during rest
- Difficulty wearing shoes because bone spurs (overgrowths) develop
- Dull pain in the hip, knee, or lower back due to changes in the way you walk
- Limping (in severe cases)



This disorder can be very troubling since we use the big toe whenever we walk, stoop down, climb up, or even stand. Many patients confuse hallux rigidus with a bunion, which affects the same joint, but they are very different conditions requiring different treatment.

Because hallux rigidus is a progressive condition, the toe’s motion decreases as time goes on. In its earlier stage, when motion of the big toe is only somewhat limited, the condition is called “hallux limitus.” But as the problem advances, the toe’s range of motion gradually decreases until it potentially reaches the end stage of “rigidus,” in which the big toe becomes stiff, or what is sometimes called a “frozen joint.”

What causes hallux rigidus?

Common causes of hallux rigidus are faulty function (biomechanics) and structural abnormalities of the foot that can lead to osteoarthritis in the big toe joint. This type of arthritis – the kind that results from “wear and tear” – often develops in people who have defects that change the way their foot and big toe functions. For example, those with fallen arches or excessive pronation (rolling in) of the ankles are susceptible to developing hallux rigidus.

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. In other cases, it is associated with 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.

Hallux rigidus can also result from an injury, such as stubbing your toe. Or it may be caused by inflammatory diseases such as rheumatoid arthritis or gout.

How is hallux rigidus diagnosed?

Your doctor or specialist can usually diagnose hallux rigidus just by talking to you and examining your feet, rarely, tests are needed. However if diagnosis is uncertain or looking to rule out other possible causes, investigations may include X-rays of the toe or even blood tests.

How can I manage my Stiff big toe?

In many cases, early treatment may prevent progression of a stiff big toe. The following treatments may help you to manage your symptoms. A combination of these different treatments may help. Collectively, these initial treatments are known as 'conservative' treatments for Hallux rigidus.

- **Footwear;** Choose shoes with a large toe box which will put less pressure on your toe. Stiff or rocker-bottom soles may also be recommended.
- **Joint mobilisation;** when you are resting gentle massage around the joint and keep the joint mobile as much as it can, this may reduce the associated 'stiffness of the joint.
- **An ice pack** (such as a bag of frozen peas wrapped in a tea towel) held to your foot for 15-20 minutes may also help to relieve pain.
- **Pain relief;** Painkillers such as paracetamol will often ease the pain. Sometimes anti-inflammatory medicines such as ibuprofen are useful. These are painkillers but also reduce inflammation and may work better than ordinary painkillers. Some people find that rubbing a cream or gel that contains an anti-inflammatory medicine around their toe is helpful.

Other treatments... If the above treatments are not helping to relieve your symptoms, other treatments may be available. There is no one specific treatment that appears to stand out as the best.

- **A steroid (cortisone) injection** is sometimes tried if your pain remains bad despite the above 'conservative' measures. It may relieve the pain in some people for several weeks but does not always cure the problem. It is not always successful and may be sore to have done. Steroids work by reducing inflammation. Steroid injections do carry risks, including (rarely) tearing (rupture) of the plantar fascia.
- **Surgery** may be considered in certain cases when it is the only way to eliminate or reduce pain. There are several types of surgery for treatment of hallux rigidus. In selecting the procedure or combination of procedures for your particular case, the foot and ankle surgeon will take into consideration the extent of your deformity based on the x-ray findings, your age, your activity level,

and other factors. The length of the recovery period will vary, depending on the procedure or procedures performed.