

Morton's Neuroma Excision

INTRODUCTION

A Morton's neuroma is an abnormal swelling of the nerve that runs between the bones at the bases of 2nd and 3rd or 3rd and 4th toes. The neuroma frequently results in pain at the base of these toes, often with numbness and tingling that radiates down into the toes. Symptoms tend to be exacerbated with prolonged weightbearing, particularly in tight-fitting or high-heeled shoes. Removing the Morton's neuroma is an effective way of significantly improving pain in the vast majority of patients.

THE SURGERY

Surgery to excise a Morton's neuroma includes:

- General anaesthetic and IV antibiotics
- Tourniquet around the thigh
- Incision on the top of the foot over the neuroma
- Dissection of the neuroma away from the surrounding structures
- Removal of neuroma and send for pathology review
- Closure of incision with sutures
- Local anaesthetic block
- Surgical shoe

GUIDELINES FOR POST-OP RECOVERY

HOSPITAL ADMISSION

- In hospital for 1 night, non-weightbearing on day of surgery

FIRST 2 WEEKS

- Elevate foot and rest
- Full weightbearing as tolerated in surgical shoe
- Surgical shoe on at all times to protect bandages (including in bed and shower)
- Crutches for balance only as required
- Dressings to stay dry and intact
- Strong painkillers as required
- Vitamin C 1g per day
- Move ankle back and forth to encourage circulation

2 WEEK POST-OP APPOINTMENT

- Review by Dr Zilko and nurse for removal of dressings and sutures
- Check pathology results

FROM 2 WEEKS

- Transition to normal shoes (avoid tight pointed shoes or high heels for a further 4 to 6 weeks)
- **REHAB - PODIATRY/PHYSIOTHERAPY:**
 - Joint mobilisation, soft tissue manipulation, nerve desensitisation
 - Foot intrinsic muscle exercises

Full recovery is usually 6-12 weeks.

Every patient's recovery is individual and depends on the severity of the injury/disease and complexity of the surgery.