



FAMILY FOOT AND ANKLE CLINIC

SPECIALISTS AND SURGEONS

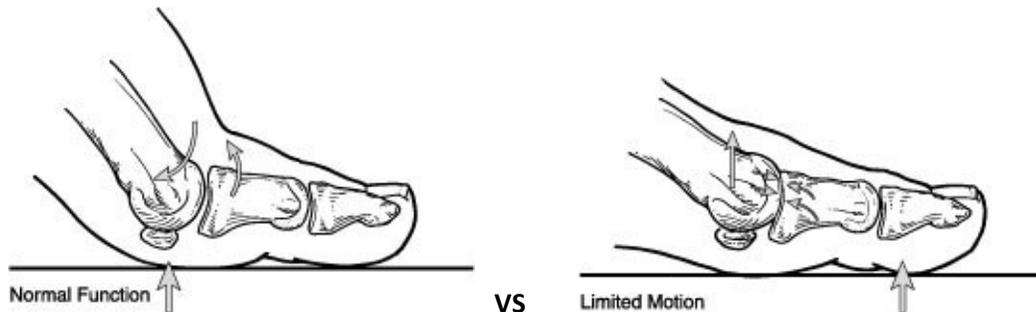
At Family Foot & Ankle Clinic, we are committed to providing you with the highest quality of care and ensuring you have all the information you need to make informed decisions about your health.

If you have any questions or concerns, please don't hesitate to reach out to us. You can contact our office directly at 763-421-7300. Additionally, you can visit our website at <https://familyfootmn.com/> for more resources and information about our services.

Thank you for choosing us for your healthcare needs!

Hallux Limitus/Hallux Rigidus

What is it?



“Hallux” is a medical term for the big toe, and stiffness of the big toe joint is termed “Hallux Limitus” (I.e., limited big toe range of motion). This can be either a structural or functional problem.

If it is a functional problem (i.e., “Functional Hallux Limitus”), the big toe may appear to have normal range of motion when your foot is not bearing weight, however, during normal functioning of the foot while standing or walking, the big toe cannot move up as much as it should. The most common cause of this is increased motion or elevation of the long bone behind the big toe (called the first metatarsal) during standing and walking, which tends to be more common in those with fallen arches or excessive pronation (rolling in) of the ankles. In some instances, this occurrence also runs in the family and is a result of inheriting a foot type that is prone to developing this condition. When the limited joint motion is functional in nature, this means that the big toe joint cannot move smoothly up and over the first metatarsal head (due to the metatarsal elevation), and jamming of the joint instead occurs (see picture above). Consequences of decreased big toe range of motion and joint jamming may include callus development on the bottom of the big toe and bone spur formation around the big toe joint.

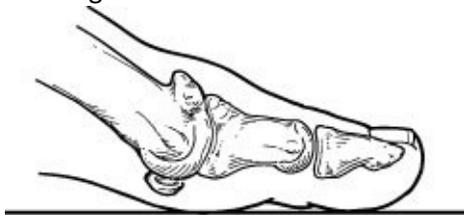
Bone spurs on the top of the big toe joint can become painful as a result of shoe pressure, and they also indicate that the functional problem may be progressing, like many conditions of the foot and ankle do, into more of a structural problem (i.e., arthritis is beginning to develop). Some individuals don't go through this initial "functional limitus" phase at all, and their joint stiffness actually begins as more of a structural ("wear-and-tear") problem. This tends to occur especially in individuals who engage in jobs, sports, or activities that increase the amount of stress through their big toe joint (i.e., stooping, squatting, repetitive push off motions). The degenerative process can also begin as a result of injury (such as stubbing your toe), or it may be caused by an inflammatory disorder (such as rheumatoid arthritis or gout). As the joint goes through more repetitive "wear-and-tear," the degenerative (arthritic) process progresses, leading to further bone spur formation, further motion restriction, and worsening pain (both WITHIN, as well as outside of, the joint). Ultimately, if the condition is left untreated, complete destruction of the joint can occur. "Hallux Rigidus" is the term we use when arthritis within the joint becomes end-stage, virtually resulting in a frozen joint.

As a disorder, Hallux Limitus/Rigidus can be very troubling and even disabling 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.

Symptoms

Early 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



- Rigid Deformity

As the disorder gets more serious, additional symptoms may develop, including:

- Pain, 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)

Diagnosis

The sooner this condition is diagnosed, the easier it is to treat. Therefore, the best time to see a foot and ankle surgeon is when you first notice symptoms. If you wait until bone spurs develop, your condition is likely to be more difficult to manage.

In diagnosing hallux rigidus, the surgeon will examine your feet and move the toe to determine its range of motion. X-rays help determine how much arthritis is present as well as to evaluate any bone spurs or other abnormalities that may have formed.

Nonsurgical Treatment

In many cases, early treatment may prevent or postpone the need for surgery in the future.

Treatment for mild or moderate cases of hallux rigidus may include:

- **Shoe modifications.** Shoes with a large toe box put less pressure on your toe. Stiff or rocker-bottom soles may also be recommended.
- **Orthotic devices.** Custom orthotic devices may improve foot function.
 - **Superfeet** over-the-counter arch supports (Men- green or blue; Women – green or berry).
 - Green tends to have slightly higher arch than other-color alternative
 - Can be found at REI, Dicks Sporting Goods, Schuler Shoes, Amazon
 - **Sole Active Insole** – Softec Response Heat Moldable Insert (better for high arch feet, but don't recommend heat molding them)
 - Can be found at REI or online
 - **Carbon Fiber Plate** (full length, rigid)
 - Amazon, Myfootshop.com
- **Medications.** Oral nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, may be recommended to reduce pain and inflammation.
- **Injection therapy.** Injections of corticosteroids may reduce inflammation and pain.
- **Physical therapy.** Ultrasound therapy or other physical therapy modalities may be undertaken to provide temporary relief.

[When Is Surgery Needed?](#)

In some cases, surgery is the only way to eliminate or reduce pain. Several types of surgery are available 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.

<https://www.foothealthfacts.org/conditions/hallux-rigidus>