

Osteoarthritis – Big Toe



What is Osteoarthritis (OA)? – it is the most common type of arthritis, at the big toe or first metatarsophalangeal joint it is also known as Hallux Rigidus. It is a progressive, degenerative condition affecting the smooth cartilage that protects the ends of the bone. This cartilage slowly becomes damaged and worn causing inflammation and pain.

What Causes this? - The exact reason is not clear but several factors may increase the risks which are: - Diabetes, Hypothyroidism, Rheumatoid conditions, Gout, Septic arthritis, Paget disease, Wilson disease, previous foot injuries, poor foot posture, poor footwear, being overweight, increased age, family history of OA and repetitive stress.

What Are the Symptoms – Pain, limited range of movement, stiffness (worse early morning), swelling, poor mobility, larger than normal looking big toe joint with formation of a bunion and disturbed sleep are the more common symptoms.

What will physiotherapy consist of?

Massage - encompassing a variety of techniques with sufficient pressure through the superficial tissue to reach the deep lying structures. It is used to increase blood flow, decrease swelling, reduce muscle spasm and promote normal tissue repair.

Mobilisation - a manual technique where the joint and soft tissues are gently moved by the therapist to restore normal range, lubricate tissues and relieve pain.

Ultrasonic Therapy - transmits sound waves into the tissues stimulating the body's chemical reactions and healing process, just as shaking a test tube in the laboratory speeds up a chemical reaction. It reduces tissue spasm, accelerates healing and results in pain relief.

Interferential Therapy - introduces a small electrical current into the tissues and can be used at varying frequencies for differing treatment effects. E.g. pain relief, muscle or nerve stimulation, promoting blood flow and reducing inflammation.

Gait re-education - will be taught if you are struggling to walk or weight bear through the foot. This may involve using a walking aid which should then allow you to walk normally with reduced symptoms.

Other treatments that could be used

Acupuncture - an oriental technique putting needles into the skin to increase or decrease energy flow promoting pain relief and healing.

Injection Therapy - a specialist procedure which needs the consent of your G.P. A non-harmful steroid and local anaesthetic are injected directly into the injured structure. It has a dramatic effect on removing inflammation and promoting healing.

Taping/Strapping - may be used if thought necessary to restrict abnormal movement and prevent further damage.

What can you do to help your condition?

Exercise programme – This is the most important part of the rehabilitation, your therapist will instruct you as to which exercises to begin with, when to add the others, as well as how to progress the exercises.

Active Rest – keep active but avoid activities and footwear that aggravate your condition.

Apply an ice pack - for a maximum of 20 minutes. A bag of frozen peas wrapped in a damp cloth works well because it moulds to the shape of the tissues. Ensure that you do not apply ice directly to the skin as this can cause an ice burn.

Weight Control is important as being overweight puts the joints under much greater strain.

Medication - Ask your GP or Pharmacist for advice on the best medication for your condition.

Podiatry - an analysis of the foot mechanics and structure during walking or running and correction as appropriate.

What if physiotherapy does not help or resolve my condition? - It is very rare that physiotherapy does not resolve this condition, in these cases we would initially recommend injection therapy or we will refer you on for further investigation.