



Podiatrist/physiotherapist Management

Delivered over 3-5 visits



Exercise approaches

Dorsiflexion and plantarflexion passive range of motion exercises : 3 sets of x 10 repetitions
Isometric flexor hallucis longus strengthening (push toe in to ground) : 10 x 10 seconds
Mobilisation using first MTPJ joint distraction (one minute) and glides (one minute)
Massage using a ball under the arch for 5 minutes twice daily at home



Orthotic approaches

A prefabricated orthotic (customised as follows)
A first ray cut out if the patient has available range of motion and the cut out does not elicit pain.
Should either of these occur a Morton's extension is to be used.
A varus wedge is to be added to the device if the foot posture index score is greater than 7.



Approaches regarding advice

Patients advised to wear footwear with a wide, deep toe box
Patients advised to avoid aggravating activities
Patients advised to use a maximum of 4 g/day of paracetamol if needed
Patients advised to perform a minimum of 30 minutes general exercise per day
Advice on weight loss, and recommendation of a dietician, where appropriate

From:

Paterson KL, Hinman RS, Menz HB, Bennell KL. The ABC foot study: an international, multi-phase, mixed methods study of the assessment of beliefs and clinical practice for managing first metatarsophalangeal joint osteoarthritis. *Osteoarthritis and Cartilage*. 2018; 26:S320.