Contact us

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
t: 020 7188 8748 9am to 5pm, Monday to Friday

Patient Advice and Liaison Service (PALS)
To make comments or raise concerns about the Trust’s services, please contact PALS. Ask a member of staff to direct you to the PALS office or:
t: 020 7188 8801 at St Thomas’ t: 020 7188 8803 at Guy’s e: pals@gstt.nhs.uk

Knowledge & Information Centre (KIC)
For more information about health conditions, support groups and local services, or to search the internet and send emails, please visit the KIC on the Ground Floor, North Wing, St Thomas’ Hospital.
t: 020 7188 3416

Language Support Services
If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.
t: 020 7188 8815 fax: 020 7188 5953

NHS Choices
Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.
w: www.nhs.uk

This leaflet aims to answer your questions about having surgery for Morton’s neuroma. It explains the benefits, risks and alternatives, as well as what you can expect when you come to hospital.

If you have any further questions, please speak to a doctor or nurse caring for you.
What is Morton’s neuroma surgery?

Morton’s neuroma is a painful swelling or irritation of the nerve that runs between the long bones of the foot (metatarsals). When this nerve becomes enlarged it causes pain in the ball of the foot that radiates to the toes. It is most common between the third and fourth toes.

The surgery aims to remove the neuroma to relieve the pain.

What happens during Morton’s neuroma surgery?

Morton’s neuroma surgery can be done as a day surgery procedure unless you have other medical problems that mean you may need to stay in hospital overnight. The surgery is performed under general anaesthetic (whilst you are asleep). A cut is made over the top of the foot, at the base of the affected toes. The operation involves removing the part of the nerve that is causing the pain and discomfort. The foot and ankle are then bandaged.
What should I do if I have a problem?

If you experience any of the following symptoms, please contact your GP or go to your nearest A&E department:

- increasing pain
- increasing redness, swelling or oozing around the wound site
- fever (temperature higher than 38°C).

If you have an infection at any time during your recovery, either suspected by you or diagnosed by your GP or an A&E doctor, please contact your consultant's secretary on 020 7188 4443.

Contact details

If you have any questions or concerns about Morton's neuroma surgery; please contact the following (Mon-Fri, 9am-5pm)

- Your consultant's secretary on 020 7188 4443
- The clinical nurse specialist – call the hospital switchboard on 020 7188 7188 and ask for the bleep desk. Ask for bleep 2567 and wait for a response. This will connect you to the clinical nurse specialist directly.

Please contact your GP or go to your local A&E department if you have any urgent medical concerns outside these hours.

Why should I have Morton’s neuroma surgery?

Non-surgical treatment methods may have been tried first. These include appropriate wide and soft shoes or shoe inserts to cushion the sole of the foot. Sometimes an injection helps the symptoms. If these measures all fail, then you may wish to consider surgery.

What are the risks?

In general, the risks of any operation relate to the anaesthesia and the surgical procedure itself.

In most cases you will have a general anaesthetic. You will be able to discuss this with the anaesthetist before surgery and he/she will identify the best method for your individual case. For more information about this please see our leaflet, Having an anaesthetic. If you don’t have a copy, please ask us for one.

The main surgical risks are listed below. The full list of risks will be explained by the surgeon treating you.

**Swelling:** Your foot will swell after the operation as part of the response to surgery and the healing process. This will reduce gradually but it may take more than six months for the swelling to go down completely. It is important to elevate your foot in the early stages.
Infection: The incision (cut) usually heals within two weeks, but may leak a small amount of fluid. In a small number of cases (about five out of 100 patients), the wounds may become infected and you may need to be prescribed antibiotics. As the neuroma is very deep in the foot, wound problems are more common.

Persistent or recurrent pain: A proportion of patients (10 to 20 out of 100 patients) experience persistent pain after surgery, or their symptoms may recur. Further surgery may be necessary.

Numbness: The operation involves removing the part of the nerve that causes pain and discomfort. As a result, some permanent numbness will be experienced in the web-space of the involved toes.

Are there any alternatives?
Simple non-surgical measures, as detailed above, should be tried before undergoing surgery.

5 - 6 weeks after surgery
You will have a further appointment to see a specialist in clinic.

It may take six weeks to return to your normal sporting activity level. You can start gentle exercises and activities earlier and gradually increase your activity level with time. You should speak to your surgeon about this if you are uncertain.

6 - 12 weeks after surgery
Your mobility will continue to improve. You can usually return to work after four weeks. Low impact exercise, such as the cross trainer, long walks, cycling and light jogging can be started after six weeks.

3 - 6 months after surgery
Your foot may continue to be swollen for up to twelve months following this surgery.
**Days 14 - 21 after surgery**

You will be seen approximately two weeks after your operation in the outpatient clinic. This appointment will be posted to you. At this appointment your wounds will be checked and any stitches removed if required.

You can start driving after two weeks. The Drivers Vehicle Licensing Agency (DVLA) regards it as your responsibility to judge when you can safely control a car. You should contact your doctor or the DVLA if you are concerned about this.

Motor insurance companies vary in their policies. It is best to discuss your circumstances with your insurance company to be sure that you are covered.

**Days 22 - 28 after surgery**

You should remove all the remaining wound dressings at home, by soaking the dressings off in the shower. You should apply skin emollient such as a vitamin E moisturiser around the healing wound. Once the wound is completely healed, you should apply the moisturiser over the wound as well. You should also massage the scar to soften it and make it less sensitive.

You may go swimming if the wound is dry and healed.

At this stage, your foot will still be swollen. Do not expect to fit into your normal shoes. You may start wearing a pair of wider, looser fitting shoes. A good option includes trainers, with loosened laces.

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**How can I prepare for Morton’s neuroma surgery?**

Please refer to one of the following leaflets which will provide all of the necessary information you will need before your operation:

- **The surgical admission lounge (SAL) at Guy’s Hospital**
- **Having an anaesthetic**
- **Your day surgery under general anaesthetic - a guide for patients**

If you do not have a copy, please ask us for one or see our website at [www.guysandstthomas.nhs.uk](http://www.guysandstthomas.nhs.uk)

You should make arrangements to be collected from the hospital. Someone should stay with you overnight if you have a general anaesthetic and your operation is a day case. You may need some time off work after the surgery. We advise you speak to your employer before surgery to make plans.

**Giving my consent (permission)**

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

You should receive the leaflet, *Helping you decide: our consent policy*, which gives you more information. If you do not, please ask a member of staff caring for you for a copy.
Will I feel any pain?
There will be some pain after the surgery. During your operation local anaesthetic may be injected into your foot to reduce the pain after the operation. You will be given medicines to take home to control the pain. The nurse will go through the medicines with you, including how often and when to take them. There will be a combination of strong and weak pain killers.

It is important that you continue to take painkillers as advised after your surgery. However, if you have little or no pain you may not need to take the tablets.

If your pain does not settle, you can either be reviewed in your scheduled outpatient appointment or you should seek further advice and management from your GP.

What happens after Morton’s Neuroma surgery?

The day of your surgery
When you have recovered from the anaesthetic, normally you can get up and walk freely in a special sandal that will help protect the operation site. If it is ‘re-do’ surgery, then your walking may be limited on the same day as surgery. Your foot and ankle will be securely bandaged to protect it and to reduce the swelling. The gauze bandage which is applied in the operating theatre will stay on for two weeks. There will not be a plaster cast. You must keep your foot elevated.

Most patients can go home on the same day as the surgery.

What do I need to do after I go home?
This is a general guide only. Patients will progress and recover from their surgery at different rates. If your surgeon gives you different advice, then you should follow that.

Days 1 - 7 after surgery
The local anaesthetic in the joint will start to wear off, so you will need to start taking painkillers. You should keep the foot elevated when not walking or exercising for the first week after the operation. Whenever the foot is put down, it will swell and become sore. It is normal to see mild bruising and some dry blood on the foot. By the end of this week the post operative pain will have significantly reduced.

Day 8 - 13 after surgery
Continue to elevate the foot as much as possible. You may walk short distances within your home or to a car from this week, ensuring you are wearing the special sandal. In week two you can start working from home and possibly return to work but you must try and keep the foot elevated. Depending on the nature of your employment, you may be signed off from working for longer.