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### **Hallux rigidis**

This is degenerative arthritis of the 1<sup>st</sup> MTP joint. The name literally means stiff big toe. The causes may include familial, idiopathic, trauma or inflammatory/crystal arthropathy.

#### **What to ask in the history**

- Duration
- Pain – usually felt over the dorsum of the MTP joint, especially with toe off (forced dorsiflexion)
- Stiffness – affects push-off
- Swelling – usually dorsal, but may involve entire joint
- Shoe irritation – from dorsal osteophytes
- Treatment – analgesia,
- Other joint involvements

#### **What to look for on Examination**

- Dorsal osteophytes and soft-tissue swelling
- Limited movement – initially dorsiflexion with dorsal impingement but eventually progresses to limit all range
- Pain – with grind test and forced dorsiflexion. Mid-range pain implies total joint involvement
- Paraesthesia - from dorsal osteophytes irritating nerve
- Lesser toe deformities
- Associated IP joint stiffness/arthritis

#### **What investigations to order**

- Standing AP/Lateral Xrays – determine extent of arthritis

#### **How to treat**

- Shoeware modification – rigid sole or rocker-bottom shoes
- Analgesia
- Intra-articular Cortisone injections
- Weight-loss

#### **When to refer**

- Intractable pain
- Significant shoe wear restrictions

#### **What the surgeon may do**

- Cheilectomy – debridement of the dorsal osteophytes and joint, usually with an extension osteotomy of the proximal phalanx. Performed with early disease, and no mid-range pain
- MTP joint fusion – gold standard
- MTP joint arthroplasty – limited role!