

Hallux Valgus
(see GMEUR policy)

Clinical Presentation

- Pain from the 1st MTPJ/ Bunion.
- Exacerbated by certain footwear
- Deformity of the 1st MTPJ
- Assess functional impairment i.e. walking distance



Examination

- Degree of deformity of the 1st MTPJ
- Tenderness
- Range of movement of the 1st MTPJ? Pain from Hallux Rigidus



Investigations

- None in primary care unless considering surgical intervention
- WB AP and Lateral x-ray



Primary/Community Provision

- Advice regarding footwear- low heels and wide fitting
- Bunion pads
- Simple analgesia (paracetamol)
- NSAID as a short course if indicated eg Naproxen 250-500mg bd with PPI cover)
- Intra-articular corticosteroid injection to 1st MTPJ
- Deformity in the absence of pain is NOT an indication for surgery
- Patients with diabetes should be referred to high risk foot services for advice



Surgical Referral indicated following **Shared Decision Making Discussion** when:

- Persistent significant pain under ball of foot with functional impairment with ADLs **AND** conservative measures tried over period of 6-months **AND** patient understands they will be out of sedentary work for 2-6 weeks, physical work 2-3 months and unable to drive 6-8 weeks (2 weeks if left side and automatic)
- **OR** associated problems with hammer toes
- **OR** ulceration or infection as a result of deformity
- **If patient has Diabetes and ulceration- urgent referral to high risk foot services**