

PATIENT INFORMATION

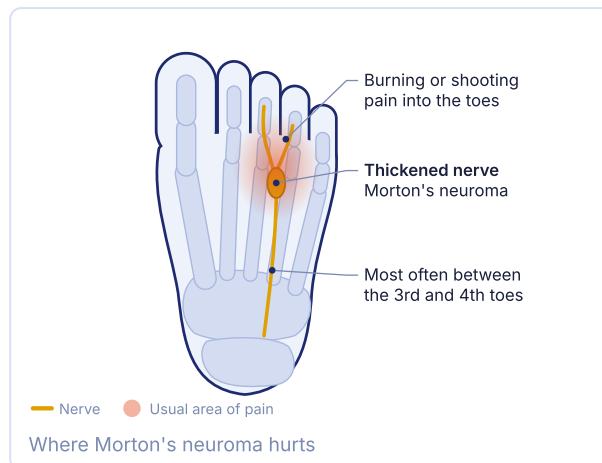
Morton's Neuroma

Causes, symptoms, diagnosis and treatment

Written by **William Joyce**, Consultant Podiatrist, HCPC registered · The Functional Podiatrist, Richmond & Kensington · Updated October 2026

IN SHORT

A Morton's neuroma is a thickening of the tissue around a nerve in the ball of the foot, most often between the 3rd and 4th toes. It causes burning, shooting or numb pain that is worse in narrow shoes. It is not a tumour, and most cases settle without surgery once footwear, foot mechanics and load are addressed.



What is a Morton's neuroma?

A thickening of the tissue around a nerve in the ball of the foot, most often between the 3rd and 4th toes. Despite the name, it is not a tumour. The nerve is compressed or irritated over and over, and the tissue around it thickens. Left alone, the nerve tends to become more sensitive and symptoms usually get worse.

What does it feel like?

Burning, shooting or numb pain in the ball of the foot, often spreading into two toes.

- Electric or shooting pain into the toes
- Numbness or tingling between the 3rd and 4th toes
- Like walking on a pebble or a bunched-up sock
- Worse in narrow shoes, better with them off

What causes it?

Repeated compression of the nerve between the long bones of the forefoot.

- Narrow, tight or high-heeled shoes
- Foot posture that loads the forefoot
- Tight or weak small muscles in the foot
- A jump in running or high-impact activity

Is it a neuroma or bursitis?

They can feel alike and often occur together, so the diagnosis is made by examination. A neuroma tends to cause burning, shooting pain and numbness into the toes. Intermetatarsal bursitis is more of a deep ache with swelling. Metatarsal stress fractures and nerve pain referred from higher up the leg can also mimic a neuroma and need ruling out.

How is it diagnosed?

Usually through a clinical examination. Squeezing between the metatarsal heads to reproduce the symptoms, and Mulder's click test, a forefoot squeeze that produces a click and pain when a neuroma is present. Ultrasound or MRI is arranged if the diagnosis is unclear or symptoms are not improving.

How is it treated?

Most neuromas respond to conservative treatment when the plan is followed consistently.

- Footwear changes: width, heel height and toe box space
- Orthotics or metatarsal padding to ease pressure on the nerve
- Strengthening for the small muscles of the foot
- Shockwave therapy for persistent cases
- A corticosteroid injection where other treatment is not enough

Do I need surgery?

Rarely. Surgery is only considered when conservative treatment has been tried properly over an extended period. Long-standing neuromas are harder to settle, which is why it is worth getting symptoms checked early.

Can I keep running?

Often yes, with sensible load management, footwear changes and offloading the forefoot. The aim is a plan that keeps you active while the nerve settles.

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FROM THE CLINIC

"Most neuromas I see settle without surgery once footwear, orthotics and load are dealt with together. The most important first step is making sure it is a neuroma, because bursitis, stress fractures and referred nerve pain can all feel very similar."

William Joyce, Consultant Podiatrist, The Functional Podiatrist

Three things you can do today

- 1 Choose shoes with a wide toe box and a lower heel.
- 2 Avoid tight or pointed footwear for long periods.
- 3 Cut back on the activity that flares it rather than stopping altogether.

When to see a podiatrist

- Burning or numb pain in the ball of the foot that keeps returning
- Pain that stops you wearing normal shoes or exercising
- Symptoms that are slowly getting worse
- Pain on one spot of a bone that is worse when you hop
- Numbness that is constant or spreading

Get it properly assessed

Your treatment plan depends on what is driving the problem. We assess, explain what we find and build a plan around your activity and goals.

HCPC-registered podiatrists in Richmond (Pools in the Park, TW9 2SF) and Kensington (Sprint Physiotherapy, W8 4LY). No referral needed.

More on this condition: thefunctionalpodiatrist.uk/neuroma.html

Book an assessment

Call 020 3576 0630

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