

Osteoarthritis of the foot and ankle

arthritis-uk.org



We are Arthritis UK

We're the 10 million adults, young people and children living with arthritis. We're the carers, researchers and healthcare professionals. The families and the friends. All united by one powerful vision: a future free from arthritis. So that one day, no one will have to live with the physical, emotional and practical challenges that arthritis brings.

There are many different types of arthritis. And we understand that every day is different. What's more, what works for one person may not help another. That's why our trusted information blends the latest research and expert advice with a range of lived experiences. In this way, we aim to give you everything you need to know about your condition, the treatments available and the many options you can try, so that you can make better-informed choices to suit your needs.

We're always happy to hear from you whether it's with feedback on our information, to share your story, or just to find out more about the work of Arthritis UK. **Contact us at healthinfo@arthritis-uk.org**

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What is osteoarthritis of the foot and ankle?

Osteoarthritis is the most common type of arthritis. It can affect any joint in the body, including those in the feet and ankles.

Osteoarthritis develops when the joint's ability to repair itself becomes less effective. This can lead to changes that make the joint sensitive and painful. This doesn't necessarily mean that your condition will keep getting worse. Keeping active will help to keep your joints healthy.

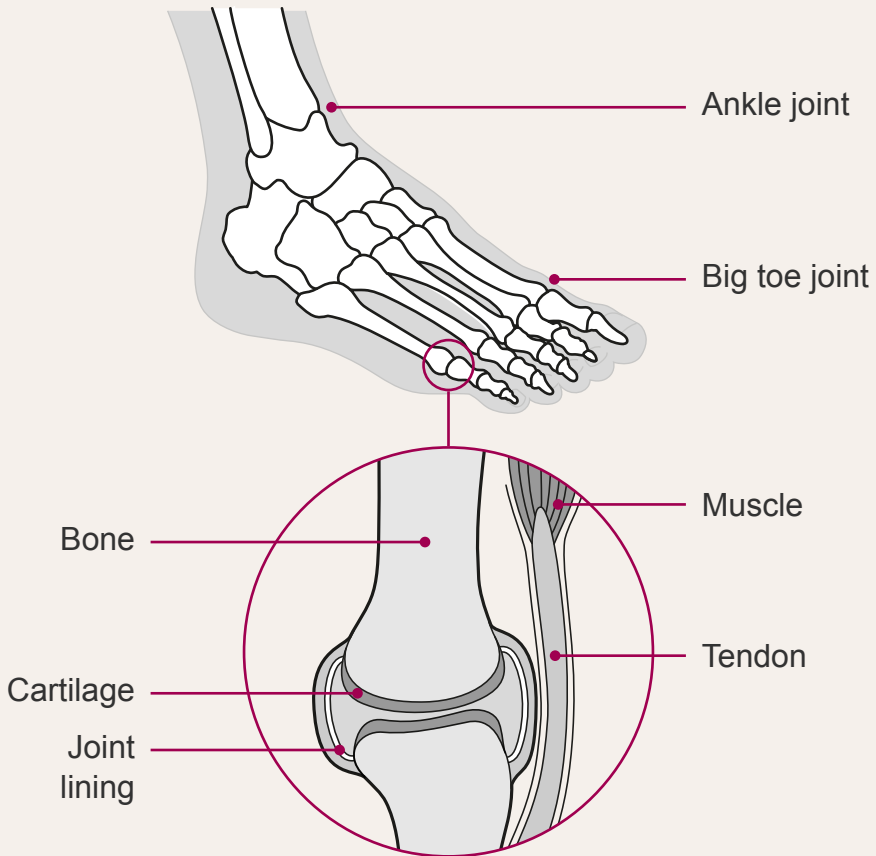
A joint is a part of the body where 2 or more bones meet. Your ankle joint is where the tibia and fibula bones in your leg join up with your foot. There are 33 joints in the foot, but the big toe is the one that is most commonly affected by osteoarthritis.

The ends of our bones are covered in a tough but slippery surface, known as cartilage. This allows the bones to move smoothly against each other. The bones are held in place by ligaments. Tendons attached to our muscles and bones help us to move around.

Sometimes, when the body's repair processes become less effective, the cartilage in our joints cannot be fully restored. And the repair processes may alter the shape and structure of the joint in ways that affect its movement.



Figure 1. Bones in the foot



The following changes can occur in a joint with osteoarthritis:

- The cartilage may become thinner and rougher, so that the bones in the joint don't move so smoothly against each other.
- Bony growths, called osteophytes, may form at the ends of the bones, altering the rounded shape. This can also affect how the bones move over each other.

- The lining of the joint, called the synovium, may be inflamed.
- Ligaments may become stretched so that the joint becomes less stable.

Osteoarthritis can affect anyone at any age, but it's most common in people over 45. It affects more women than men.

We don't always know exactly what's caused your osteoarthritis, but we do know it isn't simply 'wear and tear'. Several factors can play a part, including:

- having serious or repeated injuries to a joint, especially the ankle
- the genes inherited from your parents
- being overweight, which can increase inflammation as well as putting extra load on your joints
- having another condition that affects the joints, such as rheumatoid arthritis or gout.



For more information on the conditions above, see the Arthritis UK booklet **Osteoarthritis**. You can view all our information online at **arthritis-uk.org**



How will osteoarthritis affect me?

Not everyone with osteoarthritis will have symptoms. Those who do usually find the symptoms vary over time and may improve with the right treatments and self-management plan.

The most common symptoms of osteoarthritis are:

- pain and swelling in the affected joints
- stiffness, especially if you haven't moved for a while.

Some people with osteoarthritis may hear grating or cracking noises, called crepitus, when moving their feet and ankles. You may also feel unsteady on your feet.

You may have an achy feeling in your feet, especially if you've been particularly active or worn high heels. Some people also get pain in their feet at night.

In the ankle, osteoarthritis could cause your ligaments to become weaker, which could make the joint less stable. You might also find the muscles around your ankle become weaker over time, and it may feel painful to walk or put weight on your ankle.

Osteophytes can affect the shape of the bones and the way they move against each other. And sometimes pieces of bone and cartilage can break away and float inside the joint, which can cause more pain and swelling.

If you think you might have osteoarthritis of the foot or ankle, it's important to visit your GP, so they can diagnose you and start treatment as soon as possible.

Are there any complications?

Osteoarthritis can sometimes cause other problems in your feet, which may get worse if the condition isn't treated.

Hallux rigidus

If osteoarthritis in the feet is left untreated, cartilage can wear away completely. This might cause the bones of your foot to join together. When this happens in the big toe, it's known as hallux rigidus.

This can make it difficult to move your big toe and you may have difficulty walking. Bony growths may be visible on the top of your toe.

Bunions

Hallux rigidus and osteoarthritis in your big toe can cause the toe to point towards your other toes. When this happens, it's called a bunion.

A bony lump can then form at the side of your big toe. Sometimes the skin may look red or swollen. The skin may also harden. Corns and calluses may form if the bunion rubs against your shoes.

Bunions can alter the way you walk, so you might feel unsteady while standing and walking. They can also make wearing shoes uncomfortable.



For more information on the symptoms of this condition, see the Arthritis UK booklet **Osteoarthritis**. You can view all our information online at **arthritis-uk.org**

Managing osteoarthritis of the foot and ankle

If you have osteoarthritis, it's important to keep active. Exercising will strengthen the muscles that support your joints, and help to nourish the cartilage.

If you find exercising painful, it may help to take some paracetamol before you start.

There are 3 types of exercise you should try to do:

- **Stretching exercises:** These can help maintain and improve the range of movement of your joints.
- **Strengthening exercises:** These help to keep your muscles strong and your joints supported. Aim to do these on 2 or more days each week.
- **Aerobic/fitness exercise:** This is any activity that raises your heart rate and makes you breathe more heavily. Aim for 2 and a half hours (150 minutes) of aerobic exercise each week.

Brisk walking or cycling are good ways to stay active and improve your health and your general wellbeing. Swimming is also a good option, because it doesn't put weight on your toes, feet and ankles.

Your GP should be able to advise you on exercise. Or you could refer yourself to a physiotherapist, who can work with you to develop an exercise plan.

Water-based exercises can help. Warm-water hydrotherapy pools are not widely available, but you could still ask your physiotherapist for water-based exercises that you could do at your local swimming pool.



See the Arthritis UK booklet **Keep moving**. You can view all our information online at arthritis-uk.org

Weight management

If you're overweight, losing some weight can really help. It can reduce the strain on your joints and also help to reduce inflammation and therefore pain. Increasing your activity level and following a healthy diet is good for your general health, even if you're already a healthy weight.

There's no specific diet that will help with osteoarthritis, but it's important to make sure you're getting all the nutrients you need through a healthy, balanced diet. Cut down on fatty and sugary foods and include plenty of fresh fruit and vegetables.



For more information, see the Arthritis UK booklet **Eating well with arthritis**. You can view all our information online at arthritis-uk.org

Looking after your feet

It's important to take care of your feet, especially if you have osteoarthritis in your feet or ankles. A good footcare plan can help reduce the risk of developing other problems that could make your pain worse, such as corns, calluses or ingrown toenails.

There are a number of things you can do yourself, including:

- washing your feet every day in warm, soapy water – but don't soak your feet unless you have problems with hard skin or ingrown toenails

- drying your feet well, especially between your toes
- moisturising your feet all over – except for between your toes
- cutting your toenails regularly, cutting straight across the nail. Cutting at an angle or down the sides could lead to ingrown toenails.

If you have corns or calluses, try:

- soaking your feet in warm water to soften the skin
- using a pumice stone or foot file to remove hard skin
- moisturising your feet to keep the skin soft.

It's a good idea to get your feet checked regularly by your GP or a podiatrist. This is important if you have any problems with your feet that don't get better after a few weeks.



Podiatry

Podiatrists, also known as chiropodists, are specialists in treating foot problems. You can either be referred to an NHS podiatrist by your GP or, in some areas, you can refer yourself.

You could also pay to see one privately. Make sure they're registered with the Health and Care Professions Council (HCPC).

Your podiatrist can advise you on what footwear and treatments are most suitable for you. Treatments include:

- strapping your feet for short periods of time to limit how much you move painful joints
- suggesting specific foot and ankle exercises
- providing padding or shields for your feet and toes, to reduce pressure and friction in shoes
- treating problems with your feet, such as ingrown toenails, hard skin and corns
- providing insoles or inserts to go in your shoes to support your feet.

Footwear

It's important to wear comfortable shoes. High heels or shoes that are too small or pinch your feet can lead to problems such as hard skin or bunions.

Below are some tips for choosing shoes:

- Look for shoes with a low heel and a wide front. This means that your feet will have enough room and your toes can spread out as you walk.



- Get your shoes professionally fitted if possible, as feet can change size. Try to get shoes with a gap of 1 cm between the end of the shoe and your longest toe.
- Buy shoes in the afternoon, as your feet can swell up during the day. Trying them on in the afternoon will give you a better idea of how they fit.
- Avoid wearing shoes that don't support your feet, like ballet pumps and flip-flops.
- Wear shoes with thick, cushioned soles to reduce the stress that walking puts on your joints.
- Try to get shoes that are deep and soft on the top, so that they're comfortable and flexible.
- Shoes with laces or adjustable straps will help keep your foot in place, and stop your toes being pushed to the front of the shoe.
- Stiff soles can help if you have bunions.
- A light but stiff walking boot can help ankle pain.

Insoles and specialist footwear

Shoe inserts and insoles can help relieve pressure on all your joints, cushion your feet, and ease pain when you walk. You might also find that a brace or support for your ankle helps. A podiatrist can usually provide these.

Some shops sell cushioned insoles that you can put in your shoes. If these don't help, you may need to see an orthotist, who specialises in splints and supports. Some companies sell insoles that mould to the shape of your foot, which will give you more support and improve your foot alignment and posture.

Partial insoles, which lift the heel slightly, can sometimes be helpful if you have limited range of movement in your ankle.

If you need to wear specific footwear for work, you may find that insoles make them more comfortable. A podiatrist can give you advice.

You may be able to have a change made to your own shoes to make walking easier – for example, having a rocker added to the affected area.



For more information on working with osteoarthritis, see the Arthritis UK webpage on the subject at arthritis-uk.org/work-and-arthritis

Pain medications

Medicines can ease your pain but won't treat the underlying osteoarthritis. They are best used alongside self-management techniques and comfortable footwear to help you keep active.

Non-steroidal anti-inflammatory drugs (NSAIDs)

Non-steroidal anti-inflammatory drugs (NSAIDs) are available as creams, gels or tablets and can help reduce pain and inflammation.

It's usually recommended to try the creams or gels first.

Some NSAIDs, such as ibuprofen, are available over the counter but stronger ones have to be prescribed.

If creams or gels don't work well enough for you, you could try NSAID tablets. Ibuprofen is widely available over the counter, but it's best to check with a pharmacist that it's suitable for you. If you're taking it for more than a couple of weeks, you may need your doctor to prescribe tablets to protect your stomach from side effects.

Paracetamol and other painkillers

Paracetamol isn't usually prescribed on the NHS. However, it is widely available to buy and many people find it can ease pain. It may be useful to take some just before starting exercise.

Make sure you don't take more than the recommended dose and remember that cold and flu medicines often contain paracetamol.

Stronger pain relief medications such as co-codamol, codeine or tramadol may occasionally be prescribed.

Steroid injections

Steroid injections may occasionally be offered for short-term relief from pain and swelling. They aren't given routinely because research has shown that the pain relief lasts for a shorter period each time injections are repeated, and there is a risk of side effects.



For more information, see the Arthritis UK booklets **Painkillers and NSAIDs** and **Steroid injections**. You can view all our information online at arthritis-uk.org



Other pain relief

Warmth on the affected joints can help with pain and stiffness. This can be a bath or shower in warm water, or a heat pack applied to your skin. Some packs are reusable and can be heated in the microwave.

If there is swelling you could use an ice pack, cold pad or a pack of frozen vegetables wrapped in a damp cloth.

When applying packs to your skin, make sure you don't put them on your bare skin. Check your skin regularly during heat or cold therapy, and don't leave them on for longer than 20 to 30 minutes.

Doing some mobility exercises during heat therapy can help to reduce stiffness and increase the range of motion in a joint.

Another way to relieve pain is transcutaneous electrical nerve stimulation (TENS). A TENS machine sends electrical pulses to the nerves through pads attached to your skin. A physiotherapist can advise you on the different TENS machines available.

Wearing an elastic bandage on your ankle might help support it and ease pain in the joint. Another tip is to pace your activities – spreading tasks out over a day or week, rather than doing things all in one go, or until you feel tired.

Your physiotherapist may feel you'd benefit from mobilisation or manipulation. This is a treatment that involves a health professional applying controlled force to your joints with their hands.

You might also want to try complementary treatments. There's a wide range available, including fish oils, turmeric, glucosamine and chondroitin. The research evidence for some of these is limited, but some people do find them helpful.



For more information on complementary treatments, see the Arthritis UK booklet **Osteoarthritis**. You can view all our information online at **arthritis-uk.org**

Coping with low mood and sleep problems

If your arthritis is painful, it can affect your sleep. This can make the pain feel worse and may affect your mood. It can also be frustrating if tasks become harder. However, there are ways you can look after your emotional wellbeing.

Pain clinics run sessions to help you learn how to manage your pain. They'll usually take place in outpatient clinics, and you can be referred by whoever is treating you. They're only normally recommended if your pain is not being controlled by other treatments.

There are a number of talking therapies and techniques you can learn, which can help you manage your pain and low mood. Mindfulness and cognitive behavioural therapy (CBT) can also help you cope with osteoarthritis.

Before bed, try having a hot bath, reading a book, or listening to relaxing music. If pain is waking you during the night, try taking paracetamol or other pain relief before bed. Talk to your doctor or a sleep expert for more advice.



For more information on this, see the Arthritis UK booklet **Sleep and arthritis** and the webpage **Managing arthritis pain** at arthritis-uk.short.gy/managing-arthritis-pain. You can view all our information online at arthritis-uk.org

Surgery

Most people with osteoarthritis won't need surgery, but there are surgical options if other treatments and self-help techniques are not working for you.

Arthroscopy and debridement

An arthroscopy may be offered for hallux rigidus or if you have osteoarthritis of the ankle. This is a type of keyhole surgery carried out through small incisions (usually less than 1 cm).

The surgeon can see the affected bone inside your foot or ankle and will be able to perform a procedure called debridement, using small tools to remove any bone spurs and clean the area inside the joint.

Fusion

Fusion can be performed in your ankle, feet and toes. In this operation, the joint surfaces causing the problem are removed to allow the bones to grow together and fuse. Sometimes they are held in place with screws.

It's not possible to undo fusion surgery and it will affect the way you walk. Because of this, it's important to think about it carefully and talk to a surgeon before going ahead with it.

Ankle replacement

In an ankle replacement, the damaged surfaces of your ankle joint are removed and replaced with new material. A spacer made of plastic is also added between the 2 surfaces of the joint.

Ankle replacements should improve your pain and your range of movement in the joint. Most ankle replacements last for around 10 years, so it's important to talk to your surgeon to make sure it's the right decision for you.

Bunion surgery

There are things you can do yourself to improve any problems caused by bunions, but surgery is the only way you can get rid of them completely. In this operation, the bunion will be scraped away and your big toe straightened. Sometimes screws or staples are used to keep it in place.



You can find more information on foot and ankle surgery on our website [arthritis-uk.org](https://www.arthritis-uk.org)

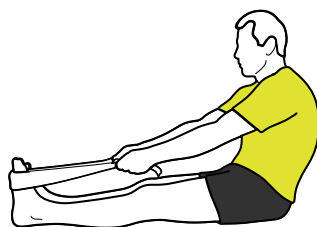


Exercises for the feet and ankles

Stretching exercises

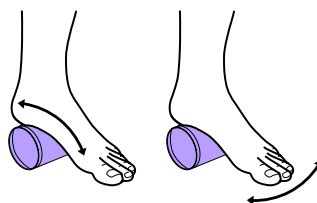
Achilles tendon and plantar fascia stretch

Loop a towel around the ball of your foot and pull your toes towards your body, keeping your knee straight. Hold for 30 seconds. Repeat 3 times on each foot.



Plantar fascia stretch

Sit down and rest the arch of your foot on a round object, such as a tin of beans. Roll your foot on the tin in all directions for a few minutes. Repeat this exercise twice a day.



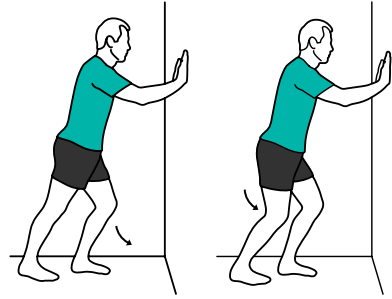
Sitting plantar fascia stretch

Sit down and cross 1 foot over your knee. Grab the base of your toes and pull them back towards your body, until you feel a comfortable stretch. Hold for 15 to 20 seconds. Repeat this 3 times.



Wall push

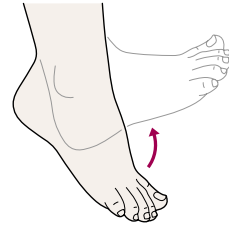
a) Facing a wall, put both hands on the wall at shoulder height and place 1 foot in front of the other. The front foot should be around 30 cm (12 inches) from the wall. With the front knee bent and the back knee straight, bend the front knee towards the wall, until the calf in your back leg feels tight. Relax and repeat 10 times.



b) Repeat a) but bring the back foot forward a little, so that the back knee is slightly bent. Repeat this 10 times.

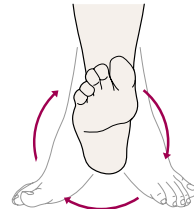
Ankle range of motion

Bend your ankle up towards your body as far as possible, then point your toes away from your body. Repeat this 10 times.



Ankle rotation

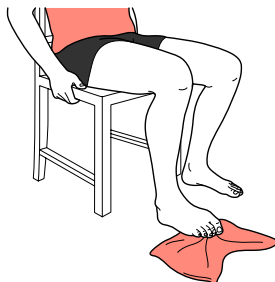
Move your ankle around slowly in a circle. Do this 10 times one way, then repeat in the opposite direction.



Strengthening exercises

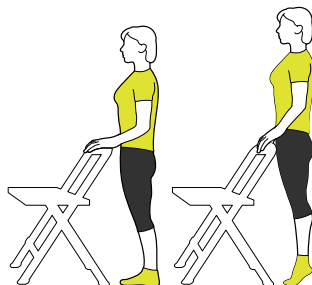
Towel pickup

Sit down with a towel on the floor in front of you. Keeping your heel on the ground, pick up the towel by scrunching it between your toes. Repeat 10 to 20 times. As you improve, add a small weight such as a tin of beans to the towel.



Standing heel raise

Standing in front of a counter or chair, using it for support, rise up on your tiptoes, with your knees straight. Slowly lower your feet back down. Repeat 10 times.



Toe spread

With your feet resting on the floor, spread your toes apart as far as possible. Hold for 5 seconds. Repeat this exercise 10 times.





Notes

Discover our support services

You don't need to face arthritis alone. Get the information, advice and support that you need.



Call our free helpline:
0800 5200 520



Connect with our online community, go to:
community.arthritis-uk.org



Chat with AVA, our online assistant, go to:
arthritis-uk.org/ask-AVA-our-virtual-assistant



Track your symptoms with our easy app, go to:
arthritis-uk.org/track-my-arthritis-symptoms-app

Thank you!

A team of people helped us create this booklet. We would like to thank:

Sophie Bennett
The 'BigTOE' team
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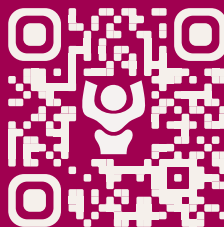
We would also like to give a special thank you to the people who shared their opinions and thoughts on the booklet. Your contributions make sure the information we provide is relevant and suitable for everyone.



Support our work

At Arthritis UK we rely on donations to fund our work. Help support people with arthritis and fund life-changing research by making a donation today. Every contribution makes a difference.

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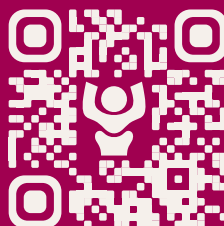
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Sign up today and we'll be in touch by email a few times a month with the latest arthritis news, including research and campaign updates, as well as tips and advice about how to live well with arthritis, and ways you can get involved.

arthritis-uk.org/signup

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