



## Introduction

Midfoot arthritis is a condition that affects the joints in the middle portion of the foot, leading to pain, stiffness, and difficulty in walking. This leaflet aims to provide you with comprehensive information about the pathology, symptoms, diagnosis, and treatment options for midfoot arthritis.

## Pathology of Midfoot Arthritis

### What is Midfoot Arthritis?

Midfoot arthritis involves the degeneration of cartilage in the joints located in the midsection of the foot. The midfoot comprises several bones and joints that connect the forefoot to the hindfoot. When the cartilage that cushions these joints wears down, bones rub against each other, causing pain and inflammation.

### Causes of Midfoot Arthritis

The primary causes of midfoot arthritis include:

- **Osteoarthritis:** This is the most common form of arthritis and occurs due to the natural wear and tear of cartilage over time.
- **Post-Traumatic Arthritis:** This type develops after an injury or trauma to the foot, such as fractures or severe sprains.
- **Inflammatory Arthritis:** Conditions like rheumatoid arthritis or gout can lead to inflammation in the midfoot joints.

## Midfoot Arthritis

### Risk Factors

Several factors can increase the risk of developing midfoot arthritis:

- **Age:** The risk increases with age as cartilage naturally degenerates over time.
- **Previous Injuries:** A history of foot injuries can predispose you to arthritis.
- **Obesity:** Excess body weight puts additional stress on the foot joints, accelerating cartilage wear.
- **Genetics:** A family history of arthritis can increase your likelihood of developing the condition.

### Symptoms of Midfoot Arthritis

The symptoms of midfoot arthritis can vary from mild to severe and may include:

- **Pain:** Persistent pain in the midfoot region, especially during weight-bearing activities.
- **Swelling:** Inflammation and swelling around the affected joints.
- **Stiffness:** Reduced range of motion in the midfoot, making it difficult to move the foot.
- **Difficulty Walking:** Pain and stiffness can lead to an altered gait or limping.
- **Bone Spurs:** Bony growths may develop as the body tries to repair damaged cartilage.

## Diagnosis of Midfoot Arthritis

To diagnose midfoot arthritis, your healthcare provider may perform the following:

- **Medical History:** A thorough review of your symptoms, medical history, and previous injuries.
- **Physical Examination:** Assessment of the foot for signs of pain, swelling, and stiffness.
- **Imaging Tests:** X-rays, MRI, or CT scans can help visualize joint damage and assess the severity of arthritis.
- **Lab Tests:** Blood tests may be conducted to rule out inflammatory arthritis conditions such as rheumatoid arthritis or gout.

## Treatment Options for Midfoot Arthritis

While there is no cure for midfoot arthritis, various treatment options can help manage symptoms and improve the quality of life.

### Non-Surgical Treatments

#### Medications

- **Pain Relievers:** Over-the-counter pain medications such as acetaminophen or NSAIDs (e.g., ibuprofen) can help reduce pain and inflammation.
- **Topical Treatments:** Creams or gels containing NSAIDs can be applied directly to the affected area for localized relief.
- **Prescription Medications:** In some cases, stronger pain relievers or anti-inflammatory medications may be prescribed.

#### Physical Therapy

A physical therapist can design an exercise program to strengthen the muscles around the midfoot, improve flexibility, and reduce pain. Techniques such as ultrasound or electrical stimulation may also be used.

#### Orthotic Devices

Custom-made orthotic inserts or arch supports can help distribute weight more evenly across the foot, reducing stress on the midfoot joints. Wearing supportive shoes with a stiff sole can also provide relief.

#### Injections

Corticosteroid injections can be administered directly into the affected joints to reduce inflammation and pain. In some cases, hyaluronic acid injections may be recommended to lubricate the joints.

#### Surgical Treatments

When non-surgical treatments fail to provide relief, surgical options may be considered.

#### Arthrodesis (Fusion Surgery)

This procedure involves fusing the affected joints to eliminate movement and reduce pain. While this limits joint flexibility, it can significantly improve pain and stability. This is the mainstay of surgical management of midfoot arthritis.

#### What will my surgery entail?

- Surgery is conducted as either a day case procedure or a single overnight stay.
- The anaesthetist will talk to you about the different anaesthetic options available to you ensuring that it is

individualised to your specific wants and needs.

- The surgery involves an incision being placed on your foot centred at the affected joint.
- The diseased cartilage is removed, foot positioned straight and held with a plate and screw construct to encourage the bones to heal.
- The incision is closed and the foot is wrapped in a partial plaster for 2 weeks. You will need to be non-weightbearing for a total of 6 weeks following surgery. You will usually be provided with anticoagulation medication for these 6 weeks.

- It is normal for the foot to remain swollen for 3-6months following surgery.
- It is normal for you to experience some pain in the toe from time to time for the first 3 months. You are expected to return to your normal level of function at 4-6 months.

## What can I expect post-operatively?

- After 2 weeks you will require a wound at which point the plaster can be removed. At this point the wound will most likely be healed but you may require a few more days with a small dressing on to ensure that the wound is fully healed.
- You will be provided with a moonboot and you can start some gentle ankle movements but must remain strictly non-weight bearing.
- At 6 weeks following surgery you will require a weight bearing X-ray of your foot to confirm that the bones are healing well. They are not expected to be fully healed at this point.
- If all is well at the 6 weeks check you can start to weight bear in the boot for an additional 6 weeks. At the end of this 6 week period you will be able to return to normal shoes.