

# Hallux Rigidus: Diagnostiek en conservatief beleid.

Ben Molenaers

Orthopedisch Trauma Chirurg

Voet-/enkel Chirurg



Orthopedisch  
Centrum  
Limburg

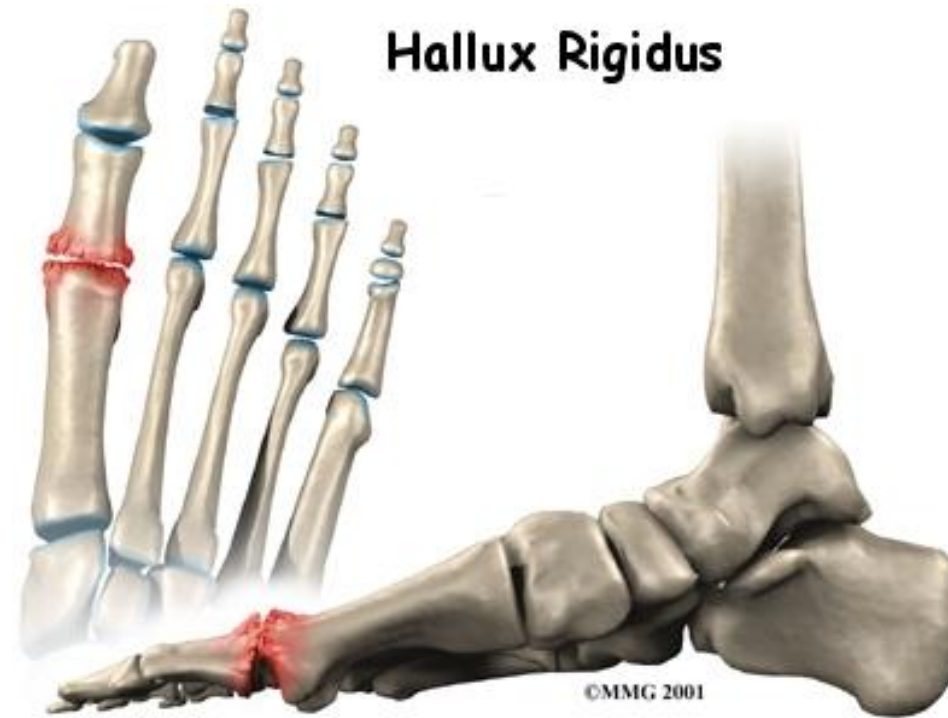
ORTHOPAEDIC  
SURGERY AND  
TRAUMATOLOGY

# Introduction

- ▶ Epidemiology
- ▶ 40% USA population foot problems
  - ▶ > 50 y:2;5% MTP-1 degenerative arthritis
    - ▶ Most common arthritic condition in the foot.
- ▶ Pathophysiology
- ▶ Unclear
  - ▶ Most common ideopathic
  - ▶ 75% Family history
  - ▶ 79% Bilateral



# Hallux rigidus = MTP-1 degenerative arthritis



# Diagnosis

## ▶ Anamnesis

- ▶ Pain
- ▶ Stiffness
- ▶ Numbness and pain by pressure
- Worse with activities !
  - ▶ Stairs
  - ▶ Running
  - ▶ Push-ups
- Ambulation with heel-rise and toe-off (dorsiflexion MTP-1)



- ▶ Clinical examination
    - ▶ Osteophytes
    - ▶ Tenderness
    - ▶ Decreased ROM (<75° dorsi)
    - ▶ !!Grinding shows more advanced arthritis !!
  - ▶ X-rays
    - ▶ !! Weight Bearing !!
- ALL FOOT and ANKLE pathologies





# Conservative Treatment

- ▶ NSAID
  - ▶ Activity adaptation
  - ▶ Shoe adaptation
    - ▶ Rocker bottom sole (stiff sole)
    - ▶ High and wide toe boxes
  - ▶ Insole (stiffening at MTP-1 level)
  - ▶ Injections
    - ▶ Dep-Medrol
    - ▶ Hyaluronic acid
- Limited results



MBT



# Take Home message

- ▶ Hallux rigidus= MTP-1 arthritis
- ▶ Clinical diagnosis
  - ▶ Dorsomedial bunion
- ▶ X-ray: **STANDING**
  - ▶ Dorsol osteophyte
- ▶ Shoe adaptation:
  - ▶ Rocker bottem sole





