

## **CROSSOVER 2<sup>nd</sup> TOE DEFORMITY**

Crossover toe is a common foot problem that can cause significant pain and inhibit physical activity. Individuals with hammertoes, bunions or a second toe that extends beyond the big toe are most susceptible to developing crossover toe as they age. It's a common problem in which the second toe gradually moves across the big toe. It can be painful and, therefore, difficult to walk comfortably or pursue an active lifestyle.

The first symptom of crossover toe is pain in the ball of the foot caused by a tear in the underlying joint capsule (plantar plate), fostering instability that allows the second toe to fall out of alignment and eventually drift. Pre-existing forefoot problems combined with normal wear and tear or possible trauma can cause the plate to tear over time. A tight calf muscle will also contribute to the problem. Decreased flexion at the ankle joint means more pressure on the ball of the foot,

Pain in the ball of the foot is the first warning sign indicating the second toe might crossover and eventually limit activity. If the pain persists and the toe starts to drift, surgery may be recommended to suture the plantar plate or realign the toe with a tendon-transfer.

### **Symptoms**

- Pain in the ball of the foot at the base of the second toe.
- Swelling in the ball of the foot under the second toe.
- Restricted or painful motion of the toe.
- Instability of the second toe joint.



### **Treatment**

- Taping the second toe down. Taping may change the imbalance around the toes and thus relieve the stress and pain.
- Wider fitting shoes
- Orthotics with a metatarsal pad to stabilize the joint
- Anti-inflammatory medication.
- Cortisone injections.
- Exercises to stretch the calf muscle and increase motion at the ankle joint.

### **Surgical Treatment**

Surgery to correct crossover toe is an outpatient procedure. Patients with bunions or hammertoes are advised to have those deformities corrected during the surgery. Recovery time is about eight weeks.

Surgery may involve the following:

- Shortening of the second metatarsal to allow the toe to move back into proper position.
- Arthrodesis of the joint of the second toe.
- Tendon transfer - moving the tendon from the bottom to the top of the toe to stabilize the joint.
- Pin fixation to hold the toe in the correct position (4-6 weeks)
- Walking cast for 6 weeks.

