Pain in the Ball of the Foot

Understanding symptoms, treatment and recovery

Pain in the Ball of the Foot

A guide to symptoms, treatment and recovery



Understanding pain in the ball of the foot

Pain in the ball of the foot (the area just behind the toes) is often caused by pressure, overuse, or inflammation of the tissues. It can affect daily activities such as walking, running, or standing.

Supporting your recovery

Cushioned shoes with a wide toe box and foot pads or metatarsal supports may help reduce pressure. A physiotherapist can tailor exercises to your symptoms.

Causes and symptoms

Understanding what may be contributing to your pain

Common causes

- Metatarsalgia - pain and inflammation in the ball of the foot
- Bunions or toe deformities - pressure on the forefoot
- Morton’s neuroma - thickening of tissue around nerves between toes
- Stress fractures - small cracks in the metatarsal bones
- Poor footwear - high heels, tight shoes, or shoes with insufficient cushioning
- Overuse injuries - from running or high-impact activities

Who may be affected?

- Runners and athletes
- People who stand or walk for long periods
- Individuals with high arches, flat feet, or toe deformities
- Those wearing tight, narrow, or high-heeled shoes

Common symptoms

- Pain in the ball of the foot, especially when standing, walking, or running
- Tingling, numbness, or burning sensations
- Swelling or bruising in the forefoot
- Pain that worsens when wearing certain shoes
- Feeling of walking on a pebble or lump in the foot

Important information

- Pain does not improve after 1-2 weeks of self-care
- Persistent swelling, bruising, or deformity
- Difficulty walking or performing daily activities
- Tingling, numbness, or burning sensations
- Suspected stress fracture or nerve problem

Recovery outlook

Most pain in the ball of the foot improves with conservative care within a few weeks to months. Early treatment and proper footwear reduce the risk of chronic pain or deformity.

Exercises and rehabilitation

Gentle movements under professional guidance

Exercise examples

Ask your physiotherapist which exercises are suitable for you. Use controlled movements and work within comfort.



Exercise instructions

1. Toe and forefoot stretch: Sit with your foot across the other knee. Gently pull your toes towards your shin. Hold for 15-30 seconds; repeat 3 times.
2. Calf stretch: Keep your back leg straight and heel down. Hold 20-30 seconds.
3. Foot strengthening: Gently scrunch a towel or pick up marbles with your toes.
4. Active big toe abduction: Sit with your foot flat. Move your big toe sideways away from the second toe, then relax. Keep your heel and forefoot still. Do not pull the toe with your hand. Follow your prescribed repetitions.

Recovery guidance

Most pain improves with conservative care within a few weeks to months. Early treatment and proper footwear reduce the risk of chronic pain or deformity.

Management and next steps

Self-care, treatment and when to seek help

Self-care and home management

- Rest - reduce activities that worsen pain
- Ice therapy - 10-15 minutes, 2-3 times daily
- Footwear - wear supportive shoes with wide toe boxes and cushioning
- Foot pads or metatarsal supports - reduce pressure on the forefoot
- Stretching exercises - calf stretches, plantar fascia stretches
- Pain relief - paracetamol or NSAIDs if safe for you

Treatment physiotherapists may offer

- Hands-on treatment: massage, mobilization, stretching
- Exercise program for strength and flexibility
- Advice on footwear, orthotics, and activity modification
- Taping or pads to support and reduce pressure

Questions or concerns?

- Pain does not improve after 1-2 weeks of self-care
- Persistent swelling, bruising, or deformity
- Difficulty walking or performing daily activities
- Tingling, numbness, or burning sensations
- Suspected stress fracture or nerve problem

References

- NHS - Foot Pain: www.nhs.uk/conditions/foot-pain
- Chartered Society of Physiotherapy - Foot & Ankle Guidance

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