

ROBERT PETTIT, MD

Restoring Function. Maximizing Performance.

ORTHOPAEDIC SPORTS MEDICINE · BEACON ORTHOPAEDICS & SPORTS MEDICINE

CINCINNATI, OH · FORT THOMAS, KY

(513) 354-3700

FELLOWSHIP-TRAINED · BOARD CERTIFIED (ABOS) · MAKO ROBOTICS CERTIFIED · CINCINNATI REDS TEAM PHYSICIAN

FOOT & ANKLE CONDITION

Jones Fracture

Fifth Metatarsal Fracture — Patient Condition Guide



A Jones fracture at the base of the 5th metatarsal (outer foot) · for education; your anatomy may differ

OVERVIEW

A Jones fracture is a break at the base of the fifth metatarsal, the long bone on the outer edge of the foot. It occurs in an area with relatively poor blood supply, which makes healing slower and less predictable than most foot fractures.

ANATOMY

The fifth metatarsal base sits at a watershed zone between two different blood supplies, creating a vulnerable spot for fracture and a common reason for delayed healing or non-union without appropriate treatment.

SYMPTOMS

- Pain and swelling on the outer midfoot
- Difficulty or pain with weight-bearing
- Bruising over the outer foot
- Tenderness directly over the fracture site

DIAGNOSIS

X-rays confirm the fracture location and pattern, distinguishing a Jones fracture from other fifth metatarsal fractures, since treatment and healing potential differ significantly by location.

TREATMENT OPTIONS

Given the area's limited blood supply, active patients and athletes are often treated surgically with a screw to promote reliable healing and a faster return to activity. Lower-demand patients may be treated non-surgically with a cast and strict non-weight-bearing.

RECOVERY TIMELINE

- Weeks 0–6: non-weight-bearing or protected weight-bearing
- Weeks 6–10: progressive weight-bearing

- Months 3–4: return to normal walking and light activity
- Months 4–6: return to running and sport

FAQS

Q Why do Jones fractures heal slowly?

This part of the bone has a limited blood supply, which is why healing takes longer and non-surgical treatment requires strict compliance.

Q Do athletes usually need surgery?

Many active patients and athletes choose surgical fixation for more reliable healing and a quicker, more predictable return to sport.



SCAN FOR THE LATEST VERSION ONLINE

robertpettitmd.com/handouts/jones-fracture.pdf

This handout is for general patient education and does not replace personalized medical advice. Always follow the specific instructions given by Dr. Pettit and your care team.

JONES FRACTURE

UNDERSTANDING YOUR INJURY & TREATMENT OPTIONS

A Jones fracture is a break in the 5th metatarsal bone of the foot in a specific area just beyond the base of the bone. These fractures can be caused by twisting injuries, sports, or overuse, and they have a higher risk of not healing due to limited blood supply.

Early diagnosis and appropriate treatment are important to promote healing and help you return to your activities.



5TH METATARSAL FRACTURE ZONES

Jones fractures occur in Zone 2, which has a higher risk of delayed healing or nonunion.



ZONE 1	ZONE 2	ZONE 3
Tuberosity (avulsion)	Jones fracture (1.5–3 cm from base)	Diaphyseal stress fracture (>3 cm from base)
Lower risk of healing problems	Higher risk of healing problems	Lower risk

HOW IT HAPPENS

Jones fractures often occur from a sudden twist of the foot, rolling the foot inward (inversion), or from repetitive stress.



- Sudden twisting injury
- Jumping or landing awkwardly
- Running on uneven surfaces
- Repetitive stress (overuse)

COMMON SYMPTOMS

- Pain on the outside of the foot
- Swelling and tenderness
- Pain with walking or activity
- Worse pain with pushing off the foot or jumping
- Bruising (may be present)

DIAGNOSIS

Your doctor will perform a physical exam and order imaging studies to confirm the diagnosis and determine the best treatment.



Physical Exam

X-ray

TREATMENT OPTIONS

1. NON-SURGICAL TREATMENT (For nondisplaced fractures)

- ✓ Immobilization in a non-weight bearing cast or boot
- ✓ Crutches to avoid putting weight on the foot
- ✓ Elevation and ice to reduce swelling
- ✓ Activity modification
- ✓ Vitamin D and calcium to support bone healing



GOAL: Allow the bone to heal while minimizing the risk of nonunion.

2. SURGICAL TREATMENT – INTRAMEDULLARY SCREW FIXATION (For displaced fractures or high-risk patients/athletes)

A screw is placed inside the 5th metatarsal bone to stabilize the fracture and promote healing.



GOAL: Stabilize the fracture, promote bone healing, and allow earlier return to activity.

3. SURGICAL TREATMENT – PLATE AND SCREW FIXATION (For complex or nonunion fractures)

A small plate and screws are used to stabilize the fracture, often in cases of nonunion or repeat fractures.



GOAL: Promote healing and restore strength in more complex cases.

RECOVERY & REHABILITATION (Typical Timeline)

0–6 WEEKS Protection Phase	6–12 WEEKS Early Healing	12–16 WEEKS Strength & Mobility	4–6 MONTHS Advanced Strength	6+ MONTHS Return to Activity
• Non-weight bearing (crutches/boot) • Focus on healing • Elevation and ice • Gentle range of motion (as advised)	• Gradual transition to partial weight bearing • Physical therapy begins • Restore range of motion • Reduce swelling	• Full weight bearing as tolerated • Strengthening exercises • Balance and proprioception training	• Sport-specific training • Plyometrics • Improve endurance and strength	• Return to sports (if cleared) • Maintain strength and flexibility • Prevent re-injury

Recovery times vary. Full return to sports may take 4–6+ months depending on the severity and treatment.

PREVENTION TIPS

- ✓ Wear supportive shoes
- ✓ Strengthen foot and ankle muscles
- ✓ Avoid running on uneven surfaces
- ✓ Increase activity gradually
- ✓ Use orthotics if recommended



WHEN TO SEEK MEDICAL CARE

- Severe pain or swelling
- Inability to bear weight
- Numbness or tingling
- Pain that does not improve with rest
- Pain during daily activities



Scan for exercise videos and more information about Jones fractures.



ROBERT PETTIT, MD
SPORTS MEDICINE & JOINT REPLACEMENT SPECIALIST

This information is for educational purposes only and is not a substitute for professional medical advice. Always follow your surgeon's recommendations.