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Manchester-Oxford Foot Questionnaire Supplementary Material

The Manchester-Oxford Foot Questionnaire (MOXFQ) is a 16-item questionnaire that was published in 2006¹. This patient reported outcome measure (PROM) consists of three domains/scales: 'Walking/standing' (seven items), 'Pain' (five items) and 'Social interaction' (four items). Patients rate each of the 16 questions on a scale out of 5 as seen in Figure 1. This is then converted to give an overall score for each domain between 0 (best possible score) and 100 (worst possible score representing greater severity of pathology). It was subsequently shown that the individual domain scores could be combined to form an overall 'Index' score². The MOXFQ can be (and often is) applied to each foot independently.

Figure 1: The Manchester-Oxford Foot Questionnaire*

. The Manchester-Oxford foot questionnaire (MOXFQ)

Circle as appropriate: RIGHT / LEFT FOOT¹ <i>During the past 4 weeks this has applied to me:</i>	Please tick ✓ one box for each statement				
	None of the time	Rarely	Some of the time	Most of the time	All of the time
1. I have pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I avoid walking long distances because of pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I change the way I walk due to pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I walk slowly because of pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I have to stop and rest my foot because of pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I avoid some hard or rough surfaces because of pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I avoid standing for a long time because of pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I catch the bus or use the car instead of walking, because of pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I feel self-conscious about my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I feel self-conscious about the shoes I have to wear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. The pain in my foot is more painful in the evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I get shooting pains in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. The pain in my foot prevents me from carrying out my work/everyday activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am unable to do all my social or recreational activities because of pain in my foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. During the past 4 weeks how would you describe the pain you <u>usually</u> have in your foot? (please tick one box) None <input type="checkbox"/> Very mild <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/>					
16. During the past 4 weeks have you been troubled by <u>pain from your foot</u> in bed at night? (please tick one box) No nights <input type="checkbox"/> Only 1 or 2 nights <input type="checkbox"/> Some nights <input type="checkbox"/> Most nights <input type="checkbox"/> Every night <input type="checkbox"/>					

¹The foot to be assessed may be indicated here. Alternatively, each question may be customised to the right foot with all questions then repeated and customised to the left foot.

Finally, please check that you have answered every question

Thank you very much

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The questionnaire has been validated for use in hallux valgus surgery and demonstrated to be reliable, valid, and with a high rate of completion. Another strength of the MOXFQ questionnaire is its responsiveness (also referred to as sensitivity to change) which is considered to be a particularly important property of a health outcome measure. It does not appear to suffer from floor or ceiling effects and correlates well with the AOFAS hallux clinical scale as well as the SF-36 generic quality of life measure³.

Subsequent research has identified the Minimal Clinically Important Difference (MCID) for the MOXFQ questionnaire in the context of hallux valgus surgery. This has been shown to be 16, 12, and 24 for the Walking & Standing, Pain, and Social Interaction domains, respectively⁴. This is useful for quantifying whether the change in MOXFQ is clinically significant.

In summary, the MOXFQ is a PROM specifically designed and validated for assessment of hallux valgus deformity which addresses issues previously identified with other foot and ankle PROMS. Its use in hallux valgus surgery and clinical research should be encouraged to enable comparisons to be drawn between different surgical techniques and osteotomies.

Figure 1 is reprinted from [Osteoarthritis and Cartilage](#), 15(8), Dawson J, Doll H, Coffey J, Jenkinson C, Responsiveness and minimally important change for the Manchester-Oxford foot questionnaire (MOXFQ) compared with AOFAS and SF-36 assessments following surgery for hallux valgus, 14, Copyright 2007, with permission of Elsevier.

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