

Jones Fractures in Elite Athletes: 2025 International Foot and Ankle Sports Consensus and Systematic Review

Julia Balboni, Scott Daniel Semelsberger, Vanessa Jean Boggiano, Cassidy Webber, Jay Thomas Moran, Paul J Mast, Alberto Vasquez, Lekha R Yaramada, Arianna Gianakos

INTRODUCTION: The Jones fracture is a complex injury with a highly variable treatment paradigm. When these injuries occur in elite athletes, high demands for physical activity and early return to sport can challenge recovery. Anatomically, fifth metatarsal fractures are prone to nonunion due to poor vascular supply, and their diagnosis may not be readily apparent early in the disease process. The absence of standardized treatment protocols further complicates effective management. This study aims to establish an expert consensus with support from a systematic review to guide management of Jones fractures in elite athletes.

METHODS: A consensus process was conducted using a modified Delphi technique with two rounds of questionnaires. General consensus was defined as 75% to 85% agreement, strong consensus as 86% to 99% agreement, and unanimous consensus as 100% agreement. In addition, a systematic review was conducted to evaluate nonoperative versus operative management of Jones fractures in athletes.

RESULTS:

Thirty-eight consensus statements were developed, with 17 achieving unanimous consensus and 21 reaching strong consensus. The systematic review included twenty-seven studies consisting of 1,056 patients. The majority of fractures with a stress etiology were treated with open reduction internal fixation (86.4%), with a mean return to sport time of 13.3 ± 4.5 weeks and a complication rate of 8.4%. Treatment failure was highest for stress fractures that were treated nonoperatively (8.2%). Traumatic Jones fractures were treated surgically in 62.7% of cases, with the remaining 37.3% managed conservatively. All patients with traumatic fractures successfully returned to sport at an average of 11.6 ± 2.2 weeks regardless of treatment modality. Treatment failure for acute fractures was highest among those treated conservatively (16.1%).

DISCUSSION AND CONCLUSION: This study aims to construct management guidelines for the diagnosis and treatment of Jones fractures in elite athletes. Expert opinion derived from the consensus process is combined with support from the literature to yield evidence-based recommendations with the aim of improving clinical outcomes.