## FOOTNOTES 202

NEWS YOU CAN USE

SPRING 2002

# Will Foot Pain Slow Your Springtime Walk?

he health benefits of walking for exercise have been documented by a number of recent studies. From weight control, to heart health, to improved cognitive abilities and bone density, there's no question that walking is good for you. And spring is a great time to get yourself up off the couch and out to enjoy the great outdoors!

But for many folks, painful feet make walking difficult, if not impossible. There are many causes of foot pain, from arthritis to bunions and heel spurs. Most of these conditions can be improved or completely cured by a podiatric foot and ankle surgeon.

For example, for those with painful arthritis around the big toe, arthritic bones in the joint located at the ball of the foot can be surgically repaired or fused. By eliminating joint motion, fusion surgery allows patients to walk pain free and be more active. In a recent survey, 100 percent of patients responded that they were satisfied with the results of fusion surgery.

Bunions are another condition that can make walking painful. However, a recent study published in the *Journal of the American Medical Association* reports that bunion surgery is more than 80 percent successful in relieving pain. Given this outstanding success rate, there's no reason for anyone to let

bunion pain keep them from enjoying walking and other outdoor activities.

Walkers can frequently experience heel pain, especially if they've been relatively inactive in the winter months. Often, ibuprofen or aspirin and doing daily stretching exercises will provide relief. But if

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### **Spring Walking Checklist**

- ✓ Wear supportive shoes
- ✓ Wear "moisture wicking" socks
- ✓ Stretch muscles before and after you walk
- If you've been inactive over the winter, don't overdo it! Gradually work into a walking program.
- ✓ If you experience pain in your feet or ankles that does not disappear within two weeks, schedule an examination with our office.

## Foot Care Is Important for Diabetes Patients

f you or one of your family members has diabetes, diligence in caring for feet is critical for prevention of ulcers and other problems that can cause difficulty in walking and may lead to amputations. Almost 2 million diabetes patients, or 15 percent of the estimated 16 million Americans with the disease, will develop a serious foot ulcer during their lifetime. About a third of all diabetic ulcers are found underneath the big toe and can be difficult to heal and prevent from recurring.

Diabetes often causes a loss of nerve sensation in the feet. This makes it difficult for patients to notice the pain from sores or calluses, which can turn into seriously infected foot ulcers. People who have diabetes must examine their feet every day, and should make regular visits to a podiatric foot and ankle surgeon for removal of calluses or ingrown toenails before they progress to more complicated conditions.

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## **Do Your Kids Have Flat Feet?**



B abies usually appear to have flat feet because their arch has not vet developed. However, flat feet in older children should be evaluated by a podiatric foot and ankle surgeon because the condition known as "flexible flatfoot" can lead to serious foot conditions later in life. Some children with flat feet will complain of pain, cramping or fatigue, but many children have flat feet and don't complain. Parents should pay attention when a child has pain in the foot, ankle, or leg, especially when walking, running, or standing. Or, you may notice that the child avoids activities such as longdistance walking.

Flexible flatfoot usually doesn't require treatment beyond shoe inserts to provide arch support, muscle stretching exercises, and perhaps different shoes. However, it's important that the condition not be ignored, because it can lead to chronic pain and long-term degenerative joint changes.

It shouldn't hurt to grow. If your child complains of foot and arch pain and leg cramps, call our office to schedule an appointment to assess the problem and determine the appropriate treatment.

### **Grownups' Flat Feet Can Be Fixed Too!**

The foot isn't made to function in a flat position. And when it does, it puts extra stress on the other joints. In adults, flatfoot can occur when the tendons that originate in the leg and responsible for holding up the arch become stretched or torn. This condition, called "progressive flatfoot," can cause pain that is usually worse when walking, rising up on the toes, or walking up and down stairs.

Usually, non-surgical treatments, such as nonsteroidal anti-inflammatory medications, ice, supportive taping and bracing, orthotic devices, and physical therapy, will relieve the pain of progressive flatfoot. If these treatments fail, surgery to repair the torn or damaged tendon may be required to restore normal function.

We have seen excellent levels of patient satisfaction with the outcomes of progressive flatfoot surgery. It is effective for relieving pain and restoring foot stability in patients who don't respond to non-surgical therapies.

If you experience foot pain that does not go away after a couple of weeks, it's important to have the foot examined and treated before the condition becomes more complicated and difficult to treat. Make an appointment with our office for a full evaluation.

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heel pain persists more than two weeks, it's best to schedule a visit with a podiatric foot and ankle surgeon for definitive diagnosis and treatment.

If your feet are keeping you from being as active as you'd like to be, make an appointment to visit our office. Don't let foot pain slow you down!

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There are many new treatments for foot disorders associated with diabetes. Careful self-examination and periodic office visits can go a long way to preventing amputations or deformities that can limit mobility and decrease the quality of life from those living with diabetes.

Dr. Judge has a unique practice that specializes in complex deformities, chronic pain, the complications of diabetes, sports medicine & related trauma as well as second opinion surgical consultations. She is the first female in Ohio to complete a three-year surgical residency program. Her residency and fellowship training emphasized major reconstructive surgery for the leg, foot and ankle. She is board-certified in reconstructive rear foot and ankle surgery with offices in Ohio and Michigan. Dr. Judge is a Fellow of the American College of Foot and Ankle Surgeons and serves as the Official Foot and Ankle Physician for The Jamie Farr Owens Corning LPGA Classic.