

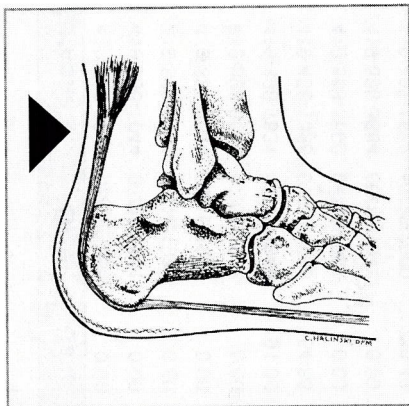
# FOOTNOTES 2001

N E W S Y O U C A N U S E

FALL 2001

## The Right Shoe Can Help Prevent Achilles Tendon Injuries

**M**any athletes who experience painful Achilles tendon injuries could prevent them by being more careful when selecting athletic shoes. They should be aware that athletic shoes that bend in the mid-foot area lack proper support and put more pressure on the heel and Achilles tendon. If you can bend a shoe in the middle, it shouldn't be worn for any sport that requires running or jumping.



A vulnerable site for disabling injury, the Achilles connects the calf muscle to the heel bone and is the largest tendon in the body. It is named after Achilles, the character from Greek mythology who was protected from wounds when his mother dipped him by the heel into a

magical pond. According to the myth, Achilles died from an arrow wound to the heel that wasn't immersed in the pond.

Injuries occur when the tendon is stretched excessively, causing severe inflammation or a tearing or rupture of the tendon. When the middle of the sole in an athletic shoe collapses, the pressure is transferred from the midfoot area to the heel, which can stretch the Achilles tendon too much. Eventually, Achilles tendonitis will result or, worse, a rupture that requires surgery.

Excessive wear also weakens mid-foot support, so athletes should replace worn shoes on a regular basis to reduce injury risk. Runners, for example, should replace their shoes every 350 to 400 miles.

The warning signs of Achilles tendonitis are pain and swelling in the tendon area following exercise. It usually worsens over time and often the leg will feel stiff or tired. Achilles tendonitis can be treated with rest, ice and anti-inflammatory drugs, such as ibuprofen. If symptoms persist, a visit to our office for a consultation will help determine the extent of the problem and the potential risk for rupturing the tendon.

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## Seek Treatment for Ankle Sprains

**T**he adage "it is better to break an ankle than sprain it" needn't apply if the problem is diagnosed and treated effectively.



Perhaps one of the most frequent injuries seen by podiatric foot and ankle surgeons is an ankle sprain that has been improperly self treated,

especially by athletes eager to get back in action.

The ankle joint consists of three bones that form a socket in which movement occurs. The ankle bones are connected by ligaments, which hold them together so the joint can be stable and function properly. Ankle ligaments are surrounded by muscles and tendons that provide upward and downward motion in the joint required for walking and running. When the ankle is sprained, the ligaments are stretched, partially torn or ruptured, depending on the severity of the injury.

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In many cases, orthotics are prescribed to provide additional support and protection for the heel area. Surgery, however, is the primary treatment for repairing a ruptured Achilles tendon, and recovery from this procedure is slow and requires extensive rehabilitation.

In addition to selecting proper footwear, we advise that athletes always stretch and walk before beginning any strenuous exercise. For those who are initiating an exercise program, the difficulty of the workouts should be increased gradually to allow calf muscles to adjust and become more flexible. 🐾

## SLOPE SENSE

The winter sports season is almost here, but before hitting the slopes, snowboard enthusiasts should know they are more susceptible to foot and ankle injuries than skiers.

Snowboard boots are more flexible than ski boots, therefore, midfoot and ankle sprains can occur because the boot's flex allows more impact at the tip of the toes. Conversely, skiers are at greater risk for lower leg and knee injuries.

We, therefore, advise snowboarders to wear stiffer boots to better protect the ankle and to more firmly hold the foot in position.



**Ankle Sprains** from page 1

In addition to sports-related occurrences, ankle sprains commonly result from twisting or walking on uneven surfaces. Some individuals are more susceptible to sprains because of their bone structure or foot shape.

Most ankle sprains are lateral—outside of the ankle joint—and symptoms can range from tenderness, swelling and discoloration to being unable to walk because the ankle joint

is too unstable.

Self treatment for mild ankle sprains involves rest, ice, compression and elevation (RICE) to reduce swelling and pain. Anti-inflammatory medications also are helpful. In more severe cases, the podiatric foot and ankle surgeon may advise patients to keep weight off the ankle and use an elastic bandage, brace, splint or short cast to eliminate motion within the joint. It can take three to eight weeks for an ankle

sprain to heal and longer in severe cases.

Those who experience repeat ankle sprains eventually may need surgery to tighten the ligaments around the ankle and improve stability. We also recommend ankle strengthening exercises, ankle supports and taping of the joint to help to prevent repeat sprains. With proper care, a previously injured ankle can tolerate normal activity and the physical demands of athletic competition. 🐾

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.