

Podiatrists help you stand in comfort

As published in *Malden Observer*, December 30, 1999, p. 20.

Dr. Susan Wexler

Guest Columnist

“When my feet hurt, everything hurts!” I hear this complaint every day in my office. It is the mantra of hard working people whose jobs demand hours of standing or miles of walking. It is also the painful song of other active people, from young runners to elders who love ballroom dancing. This article explains how podiatrists can help them get back on their feet in comfort.

Foot disorders are among the most common chronic health problems. The podiatrist is the medical specialist responsible for foot health. We help correct and control foot disorders and are always on the alert for signs of other illnesses when their early symptoms appear in the foot.

Your feet are complex structures. Each foot contains twenty-six bones, bound together by numerous joints, ligaments, muscles, tendons, nerves, and blood vessels. All these structures must work together to provide balance, support, and propulsion for the weight of your body. It is understandable that this system can sometimes fail under the physical stress of daily life.

Podiatrists are trained to diagnose what is wrong when your feet hurt and to prescribe what you can do to improve how your feet function and feel. To do this, they work closely with other medical professionals and use a variety of treatments. Modern podiatrists have at least four years of graduate school training and often one or more years of residency experience.

Drawing on their intensive training, podiatrists will treat some foot conditions in their offices, or they may prescribe medicines, design orthotics, or recommend footwear that will help cure or alleviate your problems. When needed, many podiatrists can perform foot surgery in their offices or at local

hospitals. Most insurance companies and HMOs cover medically necessary podiatric care.

When should you see a podiatrist? The simple answer is: Whenever your feet hurt. But there are other signs (such as skin growths on your feet), and your primary doctor may want you to see a podiatrist for routine care if you are a diabetic or have poor circulation in the feet. The bottom line is: Don't try to treat at home what should be treated by a medical professional. See "Foot Care Tips" below for what you can do at home and when you should see your podiatrist.

Foot care tips

- DON'T use a razor or sharp instrument on your feet. You may use a pumice stone to remove dead skin gently.
- DO see a podiatrist if you notice redness, swelling, or pus on your toes or feet.
- DON'T soak your feet in hot water; use lukewarm water instead.
- DO clean and dry well between your toes to remove dead skin and prevent athlete's foot.
- DON'T use over-the-counter foot treatments unless they were recommended by your doctor.
- DO see your podiatrist if you notice any skin growths that do not go away or are spreading.
- DON'T let chronic heel or arch pains go untreated for a long time; they may lead to bone spurs that are more problematic.
- DO see your podiatrist regularly if you are a diabetic with poor circulation in the feet.

What will the podiatrist do? That depends, of course, on what your problem is. Normally, a podiatrist will start by asking you general questions about your health, because the foot is the mirror of your general health. Diabetes, vascular disease, arthritis, neuromuscular diseases, and other general health problems often show themselves first in the feet.

Because early detection of these systemic diseases is often the key to effective care, your podiatrist will be keen to refer you to other specialists when that is warranted. In cases such as diabetes, regular foot care by your podiatrist will be an important part of the treatment plan for the disease.

The podiatrist will also ask you questions to identify disorders that are specific to your feet. Other tests and X-rays may be needed to determine the nature of the disorder or design a treatment plan. In this way, the podiatrist can diagnose and treat disorders ranging from simple corns, calluses, and warts, to painful ingrown toenails, heel spurs, pulled tendons, bunions, and hammertoes.

The causes of these disorders will vary. Sometimes they were caused by an accident at work or play; at other times they stem from bone deformities that may be hereditary or caused by arthritis. See "Common Foot Disorders" below for some of the foot problems seen daily by podiatrists.

Some common foot disorders

Corns and calluses are hard growths of dead skin caused by friction and pressure. These lesions typically respond to conservative podiatric care, involving debridement and padding.

Ingrown nails can be caused by improper nail cutting, heredity, injury, or fungal nails. Podiatrists can often eliminate the problem by a minor surgical procedure performed in the office. Many people suffer unnecessarily for years with chronic nail pain and infections.

Warts are skin growths caused by a virus. They may be mistaken for calluses, but they can grow and spread to other parts of the body if not treated. Most treatments are relatively painless.

Bunions and hammertoes are deformities of the great and smaller toes, respectively. Conservative treatments involve wearing wide, extra-depth, or custom-made shoes; surgical treatments involve removing or repositioning bones to straighten the toes.

Heel pain, heel spurs, "plantar fasciitis" are terms used to describe a pain in the heel or arch of the foot which worsens when you walk or get out of bed after a night's sleep. Treatments may include anti-inflammatory medicine, physical therapy, taping, and cortisone injections. Often the recommended solution for active people is a pair of custom-made prescription orthotics. Over-the-counter footpads usually do not correct the imbalances that lie at the root of the problem.

Once your foot problem has been identified, your podiatrist will discuss treatment options with you. Some problems can be cured; others need to be managed to alleviate pain; still others may require surgery to restore function or eliminate the cause of the problem. Many podiatrists like to start with conservative treatments before trying more invasive solutions. Whatever the options available, you are entitled to hear the benefits and risks of each option.

Children also deserve special attention for their feet, even if they don't complain of symptoms. The American Podiatric Medical Association recommends foot exams for school children on a regular basis, to catch any foot defects early. All too many children suffer with chronic ingrown toenails, warts, and untreated foot pain which affect their participation in sports and play.

As children grow, their feet will undergo gradual changes. In early childhood, it is often necessary to change shoe and sock size every month or two, to allow room for the feet to grow. A tight shoe will hamper normal foot

development and may contribute to deformities. In fact, your child has no real need for shoes until she begins to walk. And then, she needs a shoe that is both firm and flexible. Your podiatrist is a good source of advice on proper footwear for all ages.

Early detection of small foot problems can often prevent bigger problems, more pain, and greater deformity. Everyone should inspect their feet periodically. You should look out for any cuts, splinters, or growths that aren't healing or that spread to other parts of the foot. You should be aware of any loss of feeling or swelling in your feet, and be

concerned with any acute pains that don't resolve after a few weeks. Bleeding within a callus, chronic nail pains, and chronic blister are other signs that something is wrong with your feet.

You do not need to suffer with these disorders. See your podiatrist for help. Most of them are listed in the Yellow Pages under Physicians. You may also ask for free foot pamphlets from the American Podiatric Medical Association at 1-800-275-2762.

Some common foot disorders

Corns and calluses are hard growths of dead skin caused by friction and pressure. These lesions typically respond to conservative podiatric care, involving debridement and padding.

Ingrown nails can be caused by improper nail cutting, heredity, injury, or fungal nails. Podiatrists can often eliminate the problem by a minor surgical procedure performed in the office. Many people suffer unnecessarily for years with chronic nail pain and infections.

Warts are skin growths caused by a virus. They may be mistaken for calluses, but they can grow and spread to other parts of the body if not treated. Most treatments are relatively painless.

Bunions and hammertoes are deformities of the great and smaller toes, respectively. Conservative treatments involve wearing wide, extra-depth, or custom-made shoes; surgical treatments involve removing or repositioning bones to straighten the toes.

Heel pain, heel spurs, "plantar fasciitis" are terms used to describe a pain in the heel or arch of the foot which worsens when you walk or get out of bed after a night's sleep. Treatments may include anti-inflammatory medicine, physical therapy, taping, and cortisone injections. Often the recommended solution for active people is a pair of custom-made prescription orthotics. Over-the-counter footpads usually do not correct the imbalances that lie at the root of the problem.