

footprints

An informational newsletter for patients of APMA member podiatrists

Spring 2009

Running Injuries

Spring is a great time to get back into your running routine or to ramp up your training and exercise for the coming summer months. But it's always important to take it slowly and to train carefully with the advice of an expert to avoid running injuries.

Before you get started, no matter how fit you may be, it's important to remember that stretching before and after a run is a great way to minimize injuries. Choosing proper footwear is very important and your podiatrist can help you choose the right shoe for your level of activity. Finally, you will want to work with the doctor to develop an effective training routine that allows your body (and more importantly, your feet) to adapt to a new level of exercise. But no matter how careful you are, you may end up with some common injuries such as those listed here.

Shin splints: Shin splints, which are painful and appear at the front and inside of the leg, are often caused by running on hard surfaces, overstriding, muscle imbalance, or overuse. Shin splints can also be related to the shape and structure of your feet. Treatment includes rest, stretching, changing your running technique, and rebalancing foot mechanics with the use of an orthotic device in the shoe. Physical therapy can also be helpful. If you begin to feel this type of pain, slow down, take shorter strides, and see a podiatrist at your first opportunity.

Stress fractures: A stress fracture is a tiny or incomplete crack in a bone that is often caused by overuse. Stress fractures occur most frequently in the foot and ankle, so your podiatric physician is well trained to diagnose and treat this problem. Signs of a stress fracture are pain that increases with activity and decreases with rest, pain that increases over time or pain that persists even at rest. Often a stress fracture will result in swelling and a spot that feels tender to the touch.

Prompt diagnosis and treatment of a stress fracture can often prevent further injury. A podiatrist can determine your best treatment with x-ray and a physical exam. Many stress fractures can be treated with rest, ice and over-the-counter pain relievers. For most people, an appropriate period of rest will be sufficient for the bone to heal, but like all fractures, the bone can take up to 8 to 10 weeks to heal completely. In other cases, your podiatrist may need to immobilize the affected bone with a cast, cast boot, fracture shoe, or a splint. Surgical intervention may be suggested if other, more conservative treatments are not effective.

Blisters and nail problems: Runners often have blisters and nail problems but with a little maintenance and care, they can be avoided or minimized so that they don't limit your ability to keep up your training routine.



Blisters are caused by skin friction. Don't pop them. Apply moleskin or an adhesive bandage over a blister, and leave it on until it falls off naturally in the bath or shower. Keep your feet dry and always wear socks as a cushion between your feet and shoes. If a blister breaks on its own, wash the area, apply an antiseptic, and cover with a sterile bandage.

Ingrown nails are nails whose corners or sides dig painfully into the skin, often causing infection. They are frequently caused by improper nail trimming but also by shoe pressure, injury, or poor foot structure. Runners are particularly susceptible to nail problems, and long-distance runners often lose some of their toenails entirely while they are training. If an ingrown portion of the nail is painful or infected, your podiatric physician can remove the affected portion to allow for healing. It is possible to permanently remove the offending portion of the nail to prevent occurrence. •

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Neuromas



“The doctor said I have a neuroma,” Madeline told her husband after her appointment at her local podiatrist’s office. “Now I know why I have that weird pain in the ball of my foot every time I walk or when we go out dancing.”

A neuroma, also referred to as a “pinched nerve,” is a painful condition involving irritation and/or thickening of the nerve tissue between the toes, most commonly the 3rd and 4th toes. The condition brings on pain, a burning sensation, tingling, or numbness between the toes and in the ball of the foot.

“How did you get that neuroma?” Harvey asked Madeline. “I’ll bet it’s from wearing those crazy high heels.” Although

Harvey may have guessed one cause of neuromas, there are several other causes as well. Biomechanical deformities, such as a high arch or a flat foot can lead to the formation of a neuroma. Trauma can also cause damage to the nerve, resulting in swelling and inflammation. Repeated stress to the foot, common to some occupations, can create or aggravate a neuroma.

A visit to a podiatrist should be your first step in determining a treatment plan when you have this type of foot pain. The podiatrist can offer a number of treatment options upon diagnosing of a neuroma, including:

- Padding and taping;
- Medications such as oral anti-inflammatories, or injections including cortisone or a nerve destructive agent;
- Orthotic devices;
- Surgical options when conservative treatments fail.

Madeline found relief with injections which the podiatrist performed in the office and by changing her shoes. Your podiatrist can also recommend ways to relieve the pain of a neuroma including opting for other types of shoes, and resting and icing the foot. This type of pain should not be ignored, and a visit to your podiatrist can often get offer the relief you need. •



Watch Out at Your Nail Salon

While having a pedicure at the local nail salon may seem like a luxury that you deserve, it’s a good idea to keep your eyes and ears open and to make sure that you keep your feet safe by following a few easy tips.

If you schedule your pedicure first thing in the morning, you may find that the foot bath is the cleanest it will be all day. If you can’t be the first customer, however, make sure that the technician cleans both the tub and the filter before your pedicure.

If at all possible, bring your own pedicure tools to the salon. Bacteria and fungus can easily be transferred from person to person on these tools, especially if the salon does not use proper sterilization techniques. Never allow technicians to use blades or knives to cut your calluses or to eliminate thick, dead skin. Only use pumice stones, foot files, or exfoliating scrub. Once you soak your feet for a few minutes, this thickened skin can be easily sloughed off with these types of tools.

The pedicurist should trim your nails straight across. Do not let them dig into the sides of the nails or try to trim out ingrown nails. If you think you may have an ingrown toenail, see a podiatrist immediately.

Only healthy nails should be painted with colored polish. Make sure to change the polish frequently and to check your nails when the polish is off. Signs of fungus and other nail problems can often be hidden under nail polish, so be vigilant in checking your nails.

If your skin bleeds or gets nicked at the salon, make sure to carefully clean and disinfect that area and then watch for signs of infection. Check with your podiatrist immediately if you have any signs of redness or skin irritation after your salon visit. •

