

Feet Fix'n

Summer 2010

Serving the Community for over 15 Years!

Does your ankle need a "lube job"?

Osteoarthritis, the wear-and-tear type of joint degeneration, occurs when the cartilage that acts as a buffer between the bones wears thin, causing pain and restricting motion.

An injectable treatment that has proven successful in increasing the lubrication in knee joints damaged by osteoarthritis is now being used as an off-label treatment for painful ankle arthritis.

Called viscosupplementation, the therapy involves a series of three to five injections into the arthritic joint of a gel-like lubricating material called hyaluronan, a substance that is found naturally in normal joint fluid.

Some people liken this to a kind of medical "motor oil" for the joints. The fluid allows the surfaces of the cartilage to glide over each other rather than scrape. While it is not a painkiller, per se, it does have a pain-relieving effect, since the joint is able to move more smoothly and normally with the extra lubrication.

While this is not a permanent fix, viscosupplementation can provide relief for many months and delay or avoid surgery for some patients.

Viscosupplementation treatment is available in a variety of brand-name products, including Synvisc®, Euflexxa®, Supartz®, and Hyalgan®. Talk with us about your treatment options and if viscosupplementation is right for you.

Dr. Nancy A. Jagodzinski

Board Certified
Podiatric Physician & Surgeon



Fascinating FOOT FACTS

Have problem feet? You're not alone. One in six Americans has foot trouble, according to the American Academy of Orthopaedic Surgeons. That's 50 million people with sore feet!

Women have four times as many foot problems as men, courtesy of high heels.

Feet are veritable moisture machines; each pair of feet has about 250,000 sweat glands that pump out as much as a half-pint of perspiration each day.

Toenails grow fastest in hot weather, during the teenage years, and during pregnancy.

Our feet typically grow wider after we reach adulthood.

Always stand up when trying on new shoes; feet usually get two sizes larger when you stand.

With 26 bones in each foot, our feet contain one-fourth of all of the bones in the body.

Request an appointment at our Web site—www.feetfxn.com

Achilles tendonitis



Made of fibrous connective tissue, the Achilles tendon is tough and strong. It also flexes when we walk and acts as a shock absorber for the bones of our foot and leg.

This tendon can take a pounding from both serious and occasional athletes whose sports involve running, quick starts and stops, and uneven terrain. It's prone to pain and inflammation from overuse—what we call Achilles tendonitis.

The symptoms range from swelling, tenderness, and stiffness along the lower back of the leg to pain that gets worse after exercising or running.

There's a wide range of treatments, depending on the severity of the injury, from rest plus over-the-counter anti-inflammatory medication, like ibuprofen, to orthotics, bandaging, ultrasound, and even surgery.

If you're participating in any athletic endeavors this summer, including tennis, jogging, or brisk walking, take these precautions to reduce your risk of Achilles tendonitis:

Pick running shoes with well-cushioned heels.

Stretch and warm up gradually before starting.

Focus on stretching and strengthening calf muscles.

Avoid unaccustomed strenuous sprinting and hill running.

Cool down after exercise.

If you have pain in the back of the calf and heel, call us for an appointment for a proper diagnosis, since the symptoms can mimic other conditions, including a partial tendon tear or heel bursitis.

Did you know that the Achilles tendon ...

Connects the heel to the calf muscles?

Is the largest tendon in the body?

Can bear over 1,000 pounds of force?

Fighting fungus among us

Imagine a fungus that is highly contagious and hard to kill lurking in the warm, dark, damp recesses of shoes, ready to burrow its spores into the toenails of unsuspecting humans, causing pain and disfigurement.

Doesn't it sound like a creepy, fictitious menace straight out of a Hollywood horror movie? It's not. Toenail fungal infections are becoming an increasingly common problem that can be horrifically hard to treat, sometimes taking up to a year to eradicate.

It's prevalent among men, those with poor circulation, and especially people who play sports. Athletic environments and athletic footwear provide ideal conditions for the fungi.

We are experienced in treating toenail fungal infections and offer a variety of treatments, depending on the extent of the infection. But we believe the best approach is prevention:

- Keep your feet clean and dry, thoroughly washing and carefully drying them each night and after exercise.
- Always wear flip-flops or shower shoes to avoid direct exposure to the floors in locker rooms and shower facilities, and wet, public areas and walkways.
- Choose footwear that allows your feet to breathe, and rotate shoe wear, giving each pair at least 24 hours to dry out before wearing them again.
- Select socks made of natural fibers, such as cotton or silk blends, and change them frequently.
- Never share socks, towels, nail clippers, or files.
- Come in for a consultation right away if you notice cracked, discolored toenails. It's important to get the right treatment early to avoid spreading the infection.



A new wrinkle in foot ulcer care

You might not think of treating foot ulcers with Botox®, best known for temporarily paralyzing muscles that cause forehead wrinkles. Researchers at Washington University in St. Louis are investigating its use to help heal foot ulcers in people with diabetes.

They're testing the use of the drug to temporarily paralyze calf muscles in diabetics whose ulcerated feet are placed in walking casts, which eliminate pressure that can prevent proper wound healing.

Over the course of six to eight weeks, the ulcers have time to heal while the effects of the drug gradually wear off, allowing the calf muscles to slowly begin to exert more normal pressure on the foot while walking.

Early results are promising, but additional study is needed before this technique becomes more widespread.

Baby booties or infant shoes:

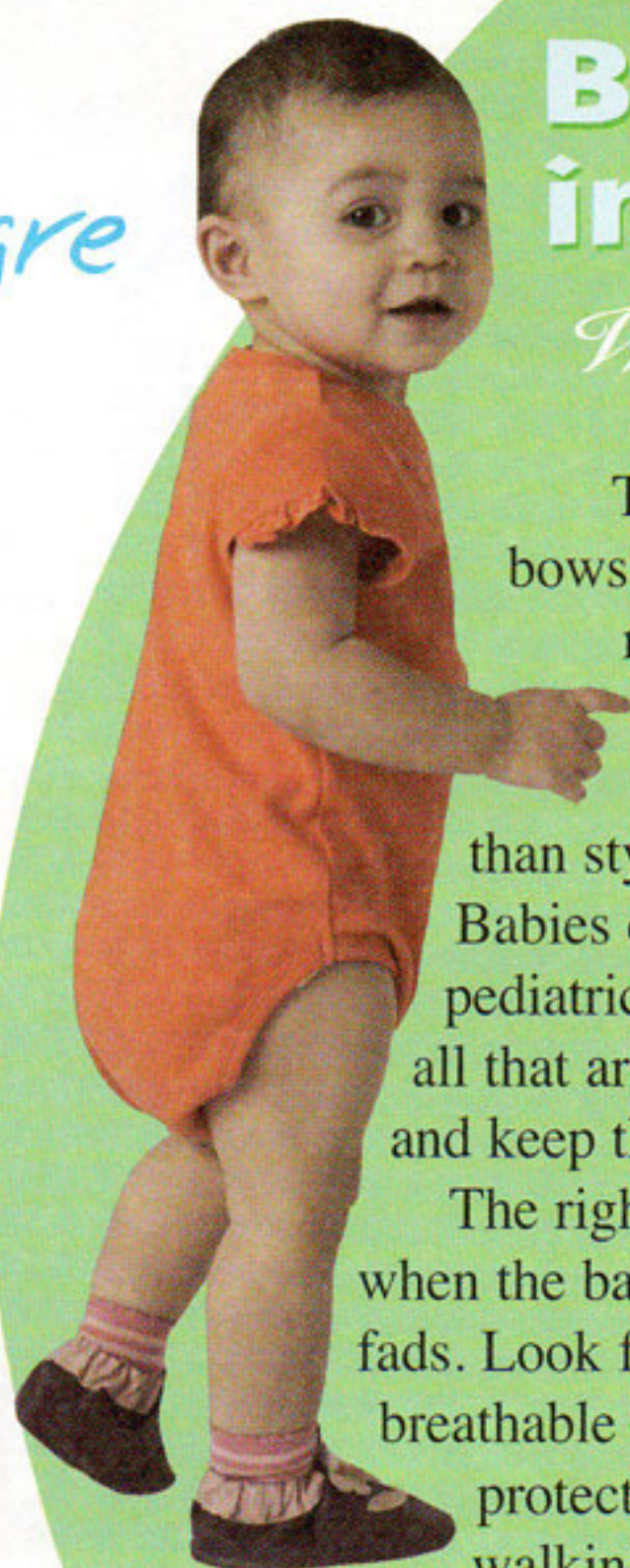
What's the right choice?

Tiny dresses, miniature sports jerseys, itty-bitsy hair bows, and mini baseball caps—baby clothing is downright adorable and irresistible for most parents and grandparents.

But when it comes to baby shoes, consider more than style and color. The most important thing to know: Babies do not need shoes. We agree with pediatricians who advise that booties are all that are needed to protect babies' feet and keep their tiny toes toasty.

The right time to start shoe shopping is when the baby is nine months old. Forget fads. Look for flexible, high-top, breathable shoes that will provide protection from the hazards of walking outdoors. Wearing shoes indoors won't help babies' arches, ankle support, or balance.

Babies' and toddlers' feet grow quickly, so make sure to replace shoes on a regular basis. Generally speaking, expect a one-half to one full shoe size of growth every two to three months up to two years of age.



STRESS FRACTURES OF THE FOOT

A hairline fracture of a small bone in the foot sidelined Houston Rockets star Yao Ming, and threatened to prematurely end his basketball career in 2009.

New York Giants quarterback Eli Manning, fighting plantar fasciitis, underwent intensive treatment to avoid turning a stress "reaction" in his heel into a full-blown stress fracture that could have forced him off his feet for several months.

Elite professional athletes like Yao and Manning make headlines—and attract attention—when talk turns to stress fractures. But anyone who takes part in activities that involve repetitive impact or motion is at risk of getting this painful condition, including people whose jobs require them to spend a lot of time on their feet.

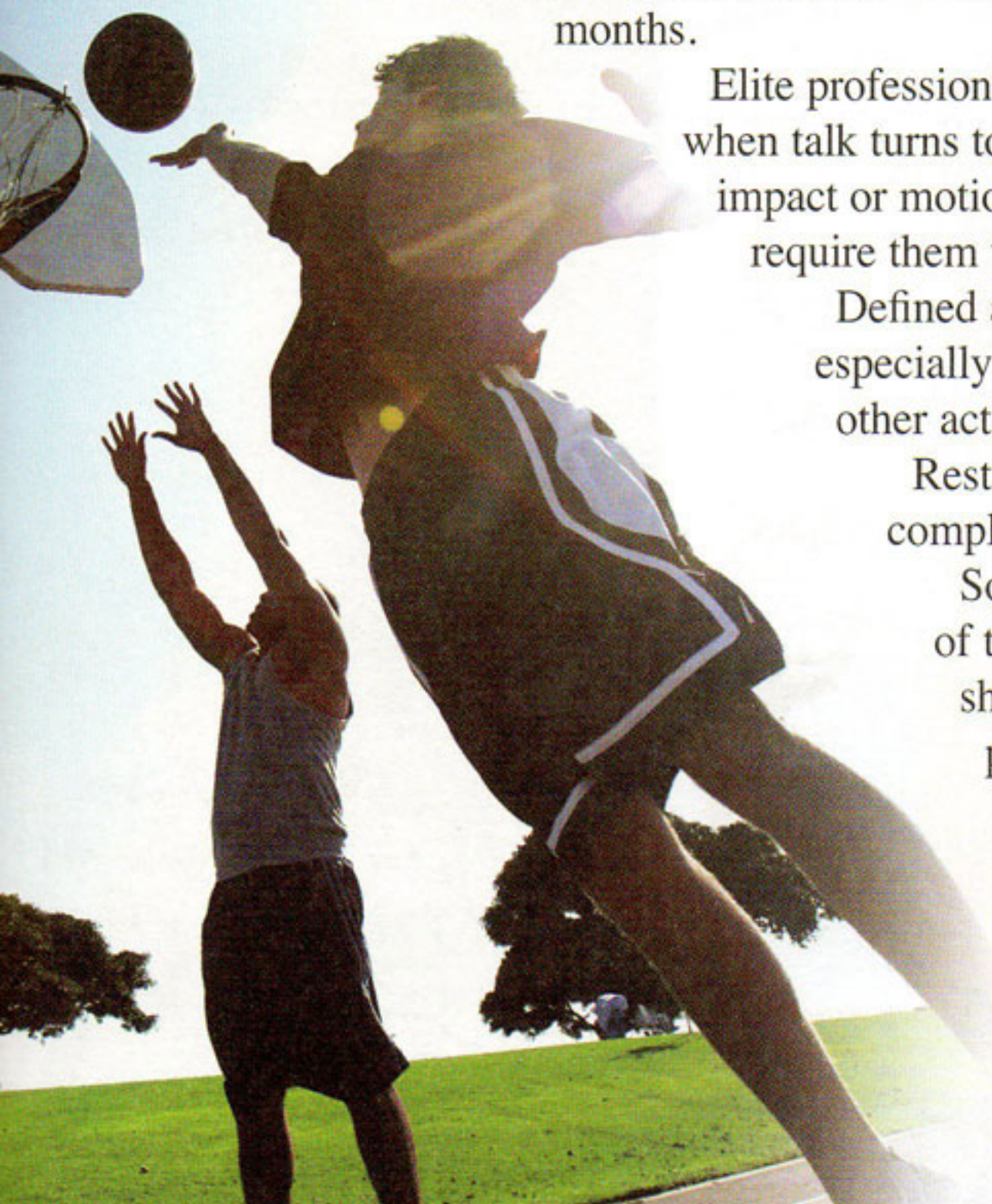
Defined as a small crack in the bone, a stress fracture often develops from overuse, especially during high-impact activities such as running, marching, jumping, dancing, or other actions that cause the feet to repeatedly strike the ground.

Rest is key to healing a stress fracture, which can take up to two months to heal completely.

Some stress fractures, depending on which bones are involved and the severity of the cracks, may require a soft cast or supportive footgear like a walking-brace shoe. Others may need surgical stabilization with pins or screws to maintain proper alignment as the bone heals.

If you have foot pain that gets worse during weight-bearing activities and you suspect a fracture, get off your feet immediately. Continuing to put pressure on the foot could result in a full break.

Call us for an appointment to make sure the injury is properly diagnosed and treated. Rest assured that you don't need to be in the NBA or NFL to get prompt, thorough treatment for a stress fracture.



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RETURN SERVICE REQUESTED



REMINDER:

Please remember to
bring in your shoes
for the homeless.

Please visit us online at
www.feetfxn.com

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The “spin” on platelet-rich plasma therapy

The news media, professional sports teams, and even podiatric/orthopedic medical conferences are buzzing about an innovative treatment that some predict has the potential to revolutionize not just sports medicine, but orthopedics in general.

Platelet-rich plasma (PRP) therapy is designed to use the body’s own healing abilities to improve the treatment of stubborn injuries involving ligaments and tendons, including a variety of foot and ankle conditions, such as painful Achilles tendonitis and plantar fasciitis.

Professional athletes from Pittsburgh Steelers Troy Polamalu and Hines Ward to golfer Tiger Woods and Atlanta Braves pitcher Takashi Saito have publicly touted the benefits of PRP in treating their sports-related injuries. Edson Buddle of the L.A. Galaxy had his Achilles tendon injected.

The treatment involves spinning a small amount of the patient’s blood to separate it into its components, and injecting a concentrated dose of the platelet-rich plasma into the injured tissue.

The platelets release proteins and growth factors that stimulate the growth of new cells, enhancing healing and speeding recovery.

While the treatment is considered safe and has been shown anecdotally to improve healing in a variety of injuries, PRP costs vary between \$500 and \$2,000 per treatment. PRP is currently covered by some medical insurance policies. Sometimes, multiple treatments are necessary. Side effects include soreness at the injection site.

Talk with us about your treatment options and if, in addition to the standard, proven therapies, PRP might be right for you.

From the office of
Dr. Nancy A. Jagodzinski
Ankle & Foot Center
of Fox Valley

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Days & Hours

Mon.	9:00 a.m.-7:00 p.m.
Tues.	9:00 a.m.-7:00 p.m.
Wed.	9:00 a.m.-7:00 p.m.
Thurs.	9:00 a.m.-7:00 p.m.
Fri.	9:00 a.m.-7:00 p.m.
Sat.	9:00 a.m.-4:00 p.m.

**Appointment and
Emergency Phone:**

(630) 778-7670

Web site:

www.feetfxn.com

