

footprints

An informational newsletter for patients of APMA member podiatrists

Fall 2012

“Dancing Dangers”

Are you familiar with “Dancing with the Stars” and “So You Think You Can Dance”? These television dance programs showcase the rigors of dancing, as well as potential foot and ankle injuries that come with the territory.

“Dancers have the same type of injuries as any other athlete. They have fractures, sprains, strains, tendinitis, ingrown nails, plantar fasciitis, heel spurs, and of course blisters,” said APMA member and podiatric physician Terry Spilken, DPM. Dr. Spilken has worked with dancers for more than 30 years in his practice in Livingston, NJ.

Common foot and ankle injuries for dancers include the following:

- **Ankle Sprain**—Ankle sprains occur when the ligaments that connect to the bone pull, stretch, or tear. Ankle sprains should be evaluated by a podiatric physician.
- **Plantar Fasciitis (heel pain)**—Overuse injury affecting the sole of the foot and creating pain after weight-bearing exercise or when walking barefoot. This injury causes inflammation of the tough, fibrous band of tissue (fascia) that connects the heel bone to the front of the foot.
- **Achilles Tendinitis**—Inflammation to the body’s longest tendon, the Achilles tendon. This tendon connects the calf muscles to the heel bone and is responsible for plantar flexion of the foot to perform jumps.
- **Dancer’s Fracture**—Fracture of the fifth metatarsal, the long bone on the outside of the foot. This injury is typically caused by landing on a turned-in foot after a jump, often creating pain and immediate swelling, as well as difficulty in walking.
- **Other Chronic Conditions**—Dancers also suffer from more than their share of warts, corns and calluses, toenail bruising, ingrown toenails, and blisters.

Treatment options should always start with prevention. Follow these treatment guidelines:

- **Implement the RICE treatment protocol:**
 - **Rest**—Stop using the injured area or reduce its use to avoid further damage.
 - **Ice**—Put an ice pack on the injured area for 20 minutes at a time.
 - **Compression**—Apply compression to an injured foot or ankle to help reduce swelling.
 - **Elevation**—Keep the injured area elevated above the level of the heart.

“Like all rigorous, physical activity, dancing poses an injury risk to the foot and ankle, especially when it’s done for an extended amount of time on a daily basis,”

APMA Past President Ronald D. Jensen, DPM.

- **Wear supportive footwear for dancing (when possible)**—Shoes that do not fit properly will accelerate issues with calluses, blisters, toenail trauma and inevitably, bunions and hammertoes.
- **Evaluate and correct biomechanical imbalances**—You may need custom orthotics prescribed by a podiatric physician. Wear them as often as possible.

If you have an injury, be proactive in consulting a podiatric physician and caring for yourself properly so that further injury can be prevented. Then you’ll be dancing for joy for many years to come.

1. Lisa Schoene, DPM, “What You Should Know About Dance Injuries, January 2005, Podiatry Today (www.podiatrytoday.com), Issue 1; Volume 18; Page 44-50 (accessed September 7, 2012)

2. Foot and Ankle/Harkness Center for Dance Injuries/Hospital for Joint Diseases, <http://hjd.med.nyu.edu/harkness/patients/common-dance-injuries/footankle> (accessed September 5, 2012)



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Bunions: Causes, Prevention, and Treatments

A bunion is an enlargement on the side of the foot near the base of the big toe (hallux)—the metatarsophalangeal (MTP) joint. A bunion forms when the bone or tissue at the big toe joint moves out of place. The toe is forced to bend toward the others, causing an often painful lump of bone on the foot.

Wearing improperly fitted shoes is partly to blame for your bunions, but your shoes are not the underlying cause. Heredity definitely plays a role as well. You do not inherit the bunion, but you inherit the foot type that may lead to bunions. Other possible causes of bunions include foot injuries, neuromuscular disorders (cerebral palsy and rheumatoid arthritis), or congenital deformities. People who suffer from flat feet or low arches are likely to develop bunions. People in occupations such as teaching, nursing, and dancing are susceptible to bunions.

Some of the signs and symptoms associated with bunions include:

- pain on the inside of your foot at the big toe;
- swelling;
- redness on the inside of your foot at the big toe joint; and
- numbness or burning in the big toe.

Conservative treatments for bunions include the following:

- **Wearing the Right Kind of Shoe**—Shoes should have a wide, flexible sole to support the foot and provide enough room in the toe box to accommodate the bunion.
- **Medications**—Anti-inflammatory drugs and cortisone injections can be prescribed by your podiatric physician to ease acute pain and inflammation.
- **Orthotic Devices**—In some cases, custom orthotic devices may be provided by your podiatric physician.
- **Surgical Options**—If conservative measures fail and you still have pain that interferes with daily activities, you may need surgery to relieve pressure and return the toe joint to its normal position.

The most common types of bunion surgery include bunionectomy and osteotomy. Bunionectomy involves shaving off the enlarged portion of the bone and realigning the muscles, tendons, and ligaments. Osteotomy is the preferred choice for severe bunions and involves making a cut in the bone, rotating the bone, and fixing it in place with pins and screws.

If surgery is required, your podiatric physician will discuss your surgical options as well as steps to take for a successful recuperation.

For more information about bunions, visit www.apma.org and click on Learn About Feet.

1. Dr. James P. Ioli, "What to do About Bunions," June 2011, http://www.health.harvard.edu/newsletters/Harvard_Health_Watch/2011/June/what-to-do-about-bunions (accessed September 7, 2012)
2. Terence Vanderhieden, DPM, "Bunions Are a Common Foot Problem, Especially for Women (Symptoms, Causes, Treatments for Bunions)," <http://foothealth.about.com/od/bunions/a/Bunions>. (accessed September 5, 2012)

Problems With Your Toes?

Take a good look at your toes. Is one of your toes pointing down instead of out? Does it make an upside-down "V" at the first joint? Ouch. You have a hammer toe.

A hammer toe generally refers to any bending or flexion of the toe beyond normal posture. Hammertoes result from muscle imbalance which causes the ligaments and tendons to become unnaturally tight. Causes include the following:

- **Injury to the toe**—Poorly fitting shoes are the main culprit. If shoes are too tight, too short, or too pointy, they push the toes out of balance. Pointy, high-heeled shoes put particularly severe pressure on the toes. Women are more likely than men to get hammer toe pain caused by their footwear.
- **Genetics**—You may have inherited a tendency to develop hammer toes. People with flat feet or high arches are more prone to hammer toes.
- **Arthritis**—The balance around the toe in people with arthritis is disrupted.

Common symptoms of hammer toes include pain or irritation of the affected toe when wearing shoes; formation of corns (buildup of skin) on the top, side, or end of the toe, or between the toes; redness and swelling at the joint; restricted or painful motion of the toe joint; and pain in the ball of the foot at the base of the affected toe.

Here are several preventative steps and possible treatment options for hammer toes:

- **Changes in Foot wear**—Choose comfortable shoes with deep, high, and broad toe boxes (toe area) that can accommodate hammer toes.
- **Fit is Important**—Avoid wearing shoes that are too tight or narrow. Children should have their shoes properly fitted on a regular basis, because their feet can often outgrow their shoes rapidly.
- **Trimming Corns and Calluses**—Trimming should be done by your podiatric physician. Never attempt to trim corns or calluses yourself because you can run the risk of cuts and infection. Your podiatric physician knows the proper way to trim corns to bring you the greatest benefit.
- **Padding Corns and Calluses**—Padding minimizes pain and allows the patient to continue a normal, active life. Your podiatric physician can provide or prescribe pads designed to shield corns from irritation.
- **Surgical Options**—Several surgical procedures are available to address hammer toes.

For less severe hammer toes, the surgery will remove the bony prominence and restore normal alignment of the toe joint, thus relieving pain. Severe hammer toes may require more complex surgical procedures. As one would imagine, surgery is the last resort.

For more information about hammer toes, visit www.apma.org by clicking on Learn About Feet.

1. Foot and Ankle Surgery of DuPage Medical Group, www.dmgpodiatry.com/conditions-treatments-hammertoe. (accessed September 5, 2012)
2. WebMD, <http://www.webmd.com/a-to-z-guides/understanding-hammertoes-basics>

"I would typically wait to perform surgery on a hammer toe until the deformity consistently interferes with shoe gear and causes daily discomfort,"

APMA member and podiatric physician
Donald Nichols, DPM (Wheaton, IL)

Doctors of podiatric medicine are podiatric physicians and surgeons, also known as podiatrists, qualified by their education, training, and experience to diagnose and treat conditions affecting the foot, ankle, and related structures of the leg.



This patient information newsletter is supported by an educational grant from Spenco, Inc.

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