

Foot Talk

D E E L L A N D F o o t A n d L e g C e n t e r

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but its destructive effects can be
stopped if the condition is
detected early.*

Message from the Doc

Few people with diabetes know about the limb-threatening foot condition, or its warning signs. As diabetes rates soar nationwide, I am seeing more patients with a rare diabetic foot complication. The condition is called Charcot foot (pronounced SHAR-co). It involves a sudden softening of the foot's bones. This can trigger an avalanche of problems, including joint loss, fractures, collapse of the arch, massive deformity, ulcers, amputation, and even death.

As the foot's structure collapses, the bottom of the foot can become convex, bulging like the hull of a ship. But diabetes patients frequently will not feel any pain because they have severe nerve damage in their lower extremities. This becomes dangerous for the patient and every person with diabetes should know the Charcot foot warning signs: a red, hot, swollen foot or ankle. Several other dangerous conditions, such as deep vein thrombosis and acute infections, share these symptoms. A red, hot, swollen foot or ankle requires emergency medical care.

Our center is equipped with the most innovative technology including digital x-rays and electronic health records system.

Office News

Deland Foot and Leg Center has been an avid part of the Volusia County area since its opening in 2005. Our center is equipped with the most innovative technology including digital x-rays and electronic health records system. Our staff is specially trained in the field of podiatry to provide care and attention to our patients. Using our staff and technology at Deland Foot and Leg Center, we can quickly and accurately diagnosis any of our patients needs.

We would like to welcome our new RN to the practice, Sandra Logan. Sandra brings her expertise in patient care with a background in oncology. Her dedication and hardworking spirit has been an asset to Deland Foot and Leg Center.

Podiatry News

Got Gout? If so, watch what you eat and drink. Changes in diet, including overindulging in certain foods and beverages, can cause gout attacks this time of year.

Gout attacks are extremely painful. They are caused when uric acid accumulates in the tissues or a joint and crystallizes. This most commonly occurs in the big toe joint. This is because the toe is the coolest part of the body and uric acid is sensitive to temperature changes. Foods that are high in purines contribute to uric acid build-up. It is recommended that people prone to gout attacks avoid purine-rich items such as shellfish (shrimp, crab, etc.), organ meats (kidney, liver, etc.), red meat, red wine and beer.

Gout can be treated with medications, diet changes, increasing consumption of appropriate fluids, and immobilizing the foot. In some cases surgery is required to remove the uric acid crystals and repair the joint.



Message from the Doc *(continued)*

Charcot cannot be reversed, but its destructive effects can be stopped if the condition is detected early. People with diabetes play a vital role in preventing Charcot foot and its complications. Diabetes patients should keep blood sugar levels under control. This has been shown to reduce the progression of nerve damage in the feet. People with diabetes should also inspect both of their feet every day, and get regular check-ups from a foot and ankle surgeon.

The following is a case study recently seen in the office and the need for quick and accurate diagnosis.

Charcot Profile: Case Study

CASE PRESENTATION: A 50 year old African-American male with a history of IDDM, dialysis, and end stage renal disease, presented to the office with a chief complaint of mild ankle pain. The patient reported he recently began a "Stair-Master" work-out program at home for approximately 20 minutes every other day. He now presents mild ankle edema and ankle joint line pain. There is a loss of epicritic sensation bilaterally in the lower extremity.

New x-rays were compared to previous radiographs and a slight displacement was appreciated on plain film in the subtalar joint. Further evaluation was needed via:

- CT imaging (Fig. 1), and MRI T2(Fig. 2),
- WBC: 5,200 cmm ESR: 59 mm/hr CRP: 2.8 mg/dL.

The differential diagnoses were: osteomyelitis, malignancy, and arthropathy.

The patient was placed in a CAM walker non-weightbearing and given antibiotic during his dialysis. Recent studies note stabilization of the ankle.

Plain film radiographs ultimately provide an earlier indication of arthropathy progression. When combined with imaging, WBC, ESR, and CRP they become powerful tools in the hands of practitioners for patients at high risk for developing **Charcot Arthropathy**.

News from Human Resources

I just returned from a seminar recently geared towards supervision in the workplace. The topic of this seminar was learning leadership skills to maximize employee performance. One of the key points that was repeated over and over was the whole idea of self-confidence in the workplace. A statistic was given that 85% of the communication we receive every day is negative. That is an impressive amount of negativity! This statistic takes in account that most people create at least 60% of the negativity in their own head. It is no wonder that we can be crushed by one negative comment when we are already burdening ourselves with so much negative self-talk.

Self-confidence does transcend into the workplace. It can affect the work you accomplish and can also influence other employees, management and the patients you serve each day. The morale of an office can go up or down with the attitudes of its employees. A negative workplace can have a huge impact on the individuals and office as a whole. Creating a positive workplace starts with each individual. Understanding that negativity comes from the inside out and can give a new challenge to be more positive and pay attention to negative self talk.

Emily Tallman

Office manager

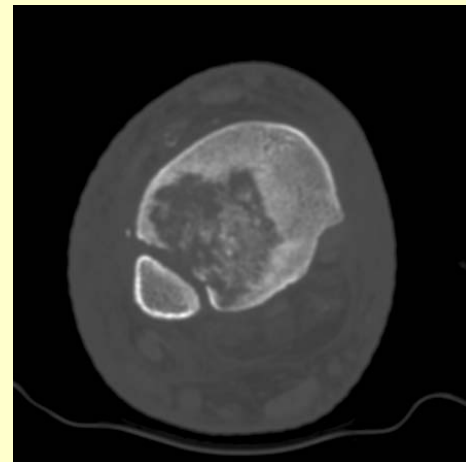


Figure 1

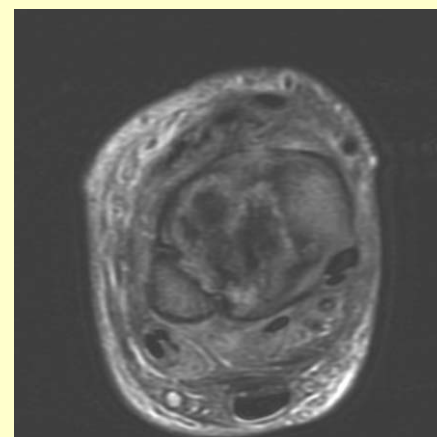


Figure 2

Foot pain ruining your golf swing?

The barrier to a perfect golf swing could lie in your big toe. Or your heel. Or on the ball of your foot. These are the three areas of your feet most likely to cause pain that can ruin your golf swing.

Behind these pain-prone spots can lie stiff joints, stretched-out tissues and even nerve damage. But pain relief is possible and frequently does not require surgery.

The three most common painful foot conditions that can ruin your golf swing are heel pain, arthritis and pinched nerves.

Arthritis can cause pain in the joint of your big toe that makes it difficult to follow-through on your golf swing.

Heel pain typically results from an inflammation of the band of tissue that extends from your heel to the ball of your foot. People with this condition compare the pain to someone jabbing a knife in their heel. Heel pain can make it uncomfortable for golfers to maintain a solid stance during crucial portions of their golf swing.

Neuromas, according to FootPhysicians.com, are nerves that become thickened, enlarged and painful because they've been compressed or irritated. A neuroma in the ball of your foot can cause significant pain as your body transfers its weight from one foot to the other in a golf swing.

Several other painful conditions can also cause instability during your swing. Some athletes and former athletes develop chronic ankle instability from previous ankle sprains that failed to heal properly. Motion-limiting arthritis and Achilles tendonitis can also affect your balance. Ill-fitting golf shoes may cause corns and calluses that make standing uncomfortable.

For the majority of golfers and other patients require simple treatments such as custom orthotic devices (shoe inserts), stretching exercises, changes to your shoes, medications, braces or steroid injections and physical therapy. However, if these conservative measures fail to provide adequate relief, surgery may be required.

Upcoming Events

- Foot Health Awareness Month** April 1- April 30
- Diabetes Class at FI Hospital Deland** April 17 @ 1-4p
- Fungal Infection Awareness Month** May 1 – May 31
- Diabetes Class at FI Hospital Deland** May 17 @ 1-4
- National Women’s Check-up Day** May 12
- National Neuropathy Week** May 12-16
- National Men Health Week** June 9-15

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