

The Physicians Foot UPDATE

Volume 1, Issue 1

How the Foot Institute can Benefit Health Care Professionals in Private Practice

Our Mission

- Work with Physicians, the ancillary medical community and the public regarding the proper treatment, identification and prevention of foot problems.
- Provide well-trained doctors committed to treat and prevent foot pathology, biomechanical disorders as well as all other problems relating to the feet and ankles.
- Establish clinics conveniently located within the community with caring, competent and professional staff dedicated to increasing the quality of life for our patients.

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Medical Specialty

Podiatrists are doctors specializing in the medical and surgical treatment of the foot. Podiatrists train for an average of 10 years in higher education. In the US, Podiatrists train and work alongside other Physicians and consequently Podiatry is recognized as a specialty like any other. In Canada it has been estimated that Podiatrists see only 5% of foot pathology. Experience with other Physicians and medical personnel indicate that this is due in part to a lack of knowledge concerning Podiatry as well as the small number of Podiatrists in Canada. The Foot Institute is working to educate the public as well as the medical community about Podiatry through conveniently located clinics, educational seminars and programs, regular newsletters and through the establishment of a Podiatric Residency in the Edmonton area.

Training

Podiatrists typically spend four years in undergraduate studies where they complete a bachelor's degree as well as all the pre-med requirements. They then take the MCAT and apply to one of seven schools where they spend 4 years in medical school to obtain a Podiatric Medical Degree. Podiatric Medical school is similar to MD school and several of the podiatry schools are located within MD schools. The first two years are virtually identical to MD school with the third and fourth years becoming more focused on the foot. This is followed by an "internship" or residency for another 1-4 years. Podiatrists treat everything from nails to reconstructive surgery of the foot.

Feature Article - Biomechanics

Biomechanics deals with how our feet adapt to the ground. By having a clear understanding of the pathologies related to the way we walk, clinicians at The Foot Institute can identify certain conditions that may lead to problems later in life. We can often prevent these problems as well as treat them once they have occurred, by making prescription functional orthotics to correct the way people are pathologically adapting to the ground.

One common biomechanical fault is pronation. This is a triplanar motion consisting of abduction, eversion and dorsiflexion (this is often evidenced by rolling in of the ankles or falling of the arches). Pronation, if left untreated, can cause plantar fasciitis, hallux limitus/rigidus, ankle sprains, bunions, capsulitis, osteoarthritis, patellarfemoral syndrome, hammertoes, etc. Over pronation can also cause the following problems:

- Tired, flat feet, and weak ankles
- Bunions, corns, callouses and crooked toes
- Heel pain, knee pain and arch strain
- Leg and foot pain, etc.

Our orthotics are prescription, custom molded inserts that can be transferred from shoe to shoe. They are built to withstand the force of four times our body weight, since this is often the amount of pressure transferred through our feet when we accelerate forward. Orthotics are most often prescribed for pronation, supination, falling arches and for diabetics to prevent Charcot foot and prevent callouses and subsequent ulcers. It is important for any diabetic experiencing a loss of sensation to use orthotics to help prevent future complications.

It is the goal of The Foot Institute to work with Physicians and other medical personnel to quickly identify common biomechanical faults in order to assist their patients in gaining treatment. It is estimated that 80% of foot problems related to biomechanics can be prevented through the proper use of functional orthotics if prescribed early enough. If problems are not diagnosed and prevented at the early stages, your Podiatrist can still help, but treatment options may be more limited. It is our hope that through increased awareness, medical professionals will look for and identify problems early and assist their patients in gaining needed treatment.

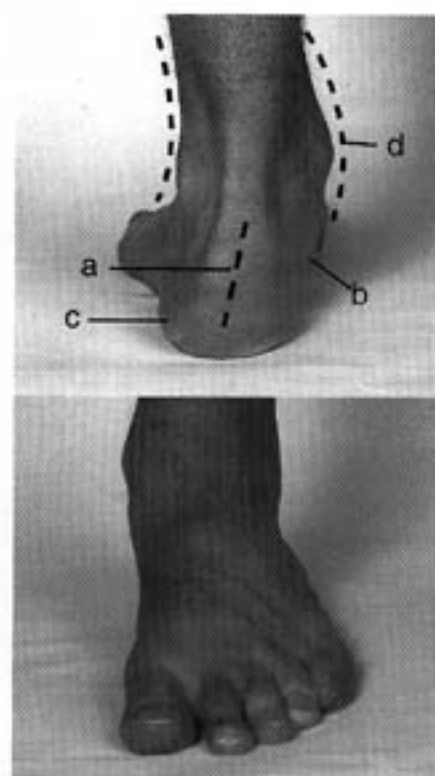
How We Help

The most common problems that Podiatrists treat include bunions, neuromas, hammertoes, plantar fasciitis, ingrown toenails, ankle sprains, fungal/bacterial infections, pes planus, pes cavus, ulcers, diabetic foot care, sports injuries, biomechanical problems, etc. A unique area of expertise to Podiatry is that of Biomechanics which is the feature article of this newsletter.

The Team Approach

While most medical schools train their students in common foot pathology, it is usually not an area of in-depth focus - but in Podiatry school that is the primary emphasis. Practitioners often don't have the time for a detailed biomechanical exam to work up causes and treatment of many foot pathologies. This is where we at The Foot Institute can help. Given the newness of the Podiatry specialty to Canada, many medical practitioners are unaware of the existence of qualified Podiatrists specifically trained to treat

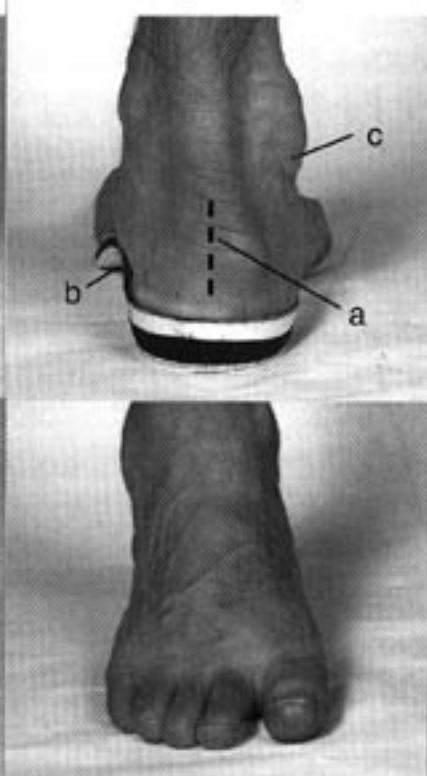
Pronating Foot (Left Foot)



Common visual indicators:

- a) Heel bisection showing everted heel.
- b) Fallen medial arch.
- c) Lateral heel protruding.
- d) Ankle convex inward.

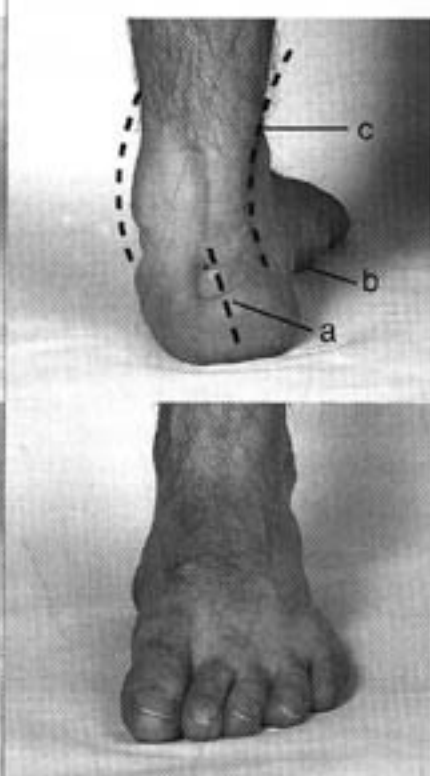
Orthotically Corrected Rectus (Normal) Foot (Right Foot)



Common visual indicators:

- a) Heel bisection showing normal vertical heel.
- b) Properly supported arch.
- c) Ankle straight.

Supinating Foot (Left Foot)



Common visual indicators:

- a) Heel bisection showing inverted foot.
- b) High medial arch.
- c) Ankle concave inward.

patients with foot and ankle problems. We assist Physicians and allied health professionals by working the patients through their history, gait analysis, biomechanical and clinical exams to maximize patient outcomes.

Referrals

Although not required, Physician referrals represent a large number of patients seen in our clinics. A note from the referring Physician is appreciated. Patients can be referred to any one of our convenient locations found on page 4 of this newsletter.



Dr. Dave Gibbs, DPM

"While most medical schools train their students in common foot pathology, it is usually not an area of in-depth focus, but in Podiatry school that is the primary emphasis."



Ask Your Podiatrist:

Q: Is foot pain something I just have to learn to live with?

A: In most cases foot problems and associated pain can be successfully treated after a thorough examination has been made by your Podiatrist.

Q: Is there a difference between orthotics prescribed by a Podiatrist as opposed to orthotics prescribed by others (e.g. orthotists, sport stores, pharmacies, over-the-counter, etc.)?

A: Definitely! Our Podiatrists have ten years or more of education and a comprehensive knowledge concerning foot anatomy, function, biomechanics, diagnosis and treatment (medical and surgical). Once problems are identified, your Podiatrist can generally correct the problem. This is often done by prescribing orthotics which are medically engineered shoe inserts that keep the bones of the foot properly aligned. Prescription foot orthotics are custom-made for a patient's feet and take into account things such as individualized foot anatomy, clinical symptoms, fashion requirements, patient age and activity requirements, etc. Orthotics from sources other than Podiatrists are often found to accommodate or provide cushioning, but often have inadequate support and control of the biomechanical fault the patient is in the most need of correcting.

Q: Is surgery the only solution for bunions, neuromas, hammertoes and other foot problems?

A: Often surgery is needed for certain types of foot problems. However, before any surgical intervention, we recommend correction of the biomechanical fault which first caused the problem. By first correcting the biomechanical fault (e.g. through orthotics) patients are less likely to see a re-occurrence of the original problem after completion of their surgery. A complete discussion on surgical procedures will be the topic of upcoming newsletters.

Our Podiatrists are often asked to lecture or provide workshops to Physician groups on such topics as biomechanical exams, foot surgery, etc. If you have a particular topic of interest, please contact our Administration Offices.

DR. SCOTT
HOLLINGSWORTH, DPM

Do you have a
question for your
Podiatrist?

Contact our
Administration
Offices @ 486-5759.



Dr. Brent
Young, DPM



Dr. David
Gibbs, DPM

Call

444-FOOT (3668)

to book an appointment near you.



Dr. Scott
Hollingsworth,
DPM



Dr. Todd
Schnoor, DPM

EDMONTON

U of A Hospital
Metabolic Centre 2F2
8440 - 112 Street

(For Diabetic Patients with physician referral only)

The Allin Clinic
10155-120 St.

Clareview Medicentre
3504-137 Ave.

Weinlos clinic
15508 - 87 Ave.

Terwilliger Medicentre
600 Riverbend Sq.

Calgary Trail Medicentre
#1, 10407-51 Ave.

Links Clinic
11910-111 Ave

Hy's Centre Clinic
#402, 11010 - 101 ST.

ST. ALBERT

Associate Medical Clinic
25 St. Michael St.

FT. MCMURRAY

Thickwood Heights Clinic
108 Wolverine Dr.
(780) 791-4547

SPRUCE GROVE

Parkland Medical
Associates
#202, 93 McLeod Ave.

GRANDE PRAIRIE

Prairie Medical Clinic
10309-98 St.
(780) 539-4010

LEDUC

Medical Arts Clinic
4721-47 Ave.

SHERWOOD PARK

Dr. Stan Kolber & Assoc.
50 Brentwood Blvd.
#100 Normed Center

WETASKIWIN

Associate Clinic
5215-49 Ave.
(780) 352-7157

SURGERY CENTRE

Hy's Centre
#710, 11010 - 101 ST.
Edmonton
(All surgeries performed with or without
Anesthesiologist as per patient request)

ADMINISTRATION

Administrative Offices
10267-178 St.
Edmonton, AB
486-5759