# Physicians Foot U P D A T E Volume 1, Issue 3

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

## **New Foot Specialists on Staff**

Dr. Todd Schnoor and Dr. Jason Lehr have recently joined the staff of professionals at the Foot Institute. Dr. Lehr will be primarily based in the Calgary area and Dr. Todd Schnoor in the Edmonton region.

Both Dr.'s Schnoor and Lehr are native Albertans growing up in the Southern part of the Province. After completion of their undergraduate degrees, both attended Podiatry School in California for 4 years. Podiatric Medical School is similar to conventional medical school and in fact several podiatry programs are located within these schools. After completion of their Podiatric Medical Degrees, both attended two year surgical residencies which covered in depth all aspects of foot and ankle surgery as well as areas such as diabetic treatment, biomechanics and gait abnormalities, etc.

During Dr. Lehr's residency, he was appointed as chief resident over the prestigious Baha Project for crippled children in Baha, Mexico. This project teams orthopedic, podiatric, anesthesiology and other specialists to perform advance reconstructive surgery for many needy patients particularly children.

Both Todd, Jason and their families are pleased to be back in Alberta and practicing with the Foot Institute.

### **New Clinics**

Since the issuance of the last newsletter, the Foot Institute has opened a number of new clinics in Calgary all situated in convenient locations. In addition, clinics were opened in Airdrie, Strathmore, Lacombe, Canmore and Sylvan Lake.

Foot Institute administrator, Mr. Mark Pilling, reports the purpose of the expansion is to establish clinics that are conveniently located and which will allow more people access to quality foot care. Many people are under the false assumption that foot pain is something that you have to learn to live with. Mr. Pilling indicates their hope is to change this notion by providing access to well trained doctors no matter where people may live. People also enjoy the advantages of added mobility knowing their needs will be meet at any of the Foot Institutes 30+ locations across Alberta.

## Patient Brochures

The Foot Institue has a number of patient brocures on such topis as Surgery, Diabetes and your Feet, Orthotics, Introduction to Common Foot Problems and Treatments, etc. Physicians or clinics wishing for copies of these materials are invited to contact our Administrative Offices @ (780) 444-3668.

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## Advanced Surgical Training and New Surgical Techniques



Podiatric Surgery has made rapid advances in recent years by requiring stringent training of all Podiatric Surgeons and utilizing new and advanced surgical techniques. Doctors at the Foot Institute who perform surgery have completed residencies specializing in surgery and have performed hundreds of surgeries

on the foot and ankle.

Surgery is performed to relieve pain and improve the function of specific foot pathology when conservative therapy is not effective or warranted. At the Foot Institute, patient education is fundamental with an emphasis always on conservative treatment before surgery.

With the exception of a few particular cases, surgical intervention to address a painful entity in the foot or ankle is part of a sequential treatment approach. The clinician is most often presented with a problem that has developed over time and in response to demands made upon the delicate, yet durable structure of the lower extremity.

The intricate architecture of the foot and ankle is quite resilient, but over time there are common problems that develop, cause discomfort and bring people into the clinic seeking relief.

A thorough consultation is needed to determine the nature of the particular problem and whether it is a simple lesion or a complex functional deformity. The next step involves addressing the etiology of the problem appropriately. This often involves identifying any underlying biomechanical faults. The use of a prescription functional orthotic and supplementary conservative therapy are frequently successful in relieving a patient's symptoms. Some patients however do not get sufficient relief with conservative therapy and will require surgery to alleviate their condition. This may be due in part to an advanced pathologic state at the time they seek assistance or a function of the demands of the patient with regard to activity level and lifestyle. Foot Specialists at the Foot Institute are able to treat not only

with conservative therapy but can offer patients the option of more invasive treatment modalities and surgical intervention if warranted.

A majority of Podiatric Surgery is performed on an outpatient (day surgery) basis. Minimally invasive procedures such as nail avulsions, matrixectomies and excision of dermal lesions can be performed in the office. More extensive cases including osteotomies (such as in bunion correction), digital arthoplasties, neuroma exicisions and other involved procedures are better addressed when performed at an outpatient surgery center.

Only Podiatrists with proper surgical training are licensed to operate in surgical centres licensed by the Province. These are identical to a hospital operating room (including equipment and support personnel) and provide sterile fields, air filtration and instrumentation necessary for an optimal outcome. Another benefit of performing procedures at a surgery center is the option of conscious sedation by an anesthesiologist. This allows for a relaxed, comfortable and somewhat amnesic experience for the patient. Naturally, clearance is requested from the patient's primary care physician for this type of anesthesia. This interaction with the primary care physician allows for assessment, diagnostic work-up and treatment options which are communicated effectively to the patient and all team members involved in the their care.

## Approach to the Surgical Foot

Before surgery, patients undergo a thorough pre-operative evaluation to determine the correct procedure necessary for each specific individual. Typically, surgeries are performed to correct underlying biomechanical faults as well as relieve current symptoms. There are many different surgical approaches available for each type of deformity. The appropriate procedure for each patient is then chosen by considering the patient's needs and expectations as well as the planned outcome.

## **Common Surgical Procedures**

## Bunionectomy

Bunion deformity or "hallux abducto valgus" is commonly seen in patients with flat feet (over-pronation).





There are many procedures developed for correction of this problem which range from doing something as simple as a capsulorrhaphy to as complex as multiple osteotomies with fixation or artificial joint replacement. In older patients who have a very arthritic joint, arthosplasty of the joint may be most beneficial. In individuals who only have pressure pain while wearing shoes, an exostectomy removing only the excess bone may be sufficient.

The most common procedure performed by Podiatric Surgeons to correct a bunion deformity is a head osteotomy of the first metatarsal, which is commonly referred to as an "Austin" bunionectomy. The correction is made by precise cuts in the bone with the capital fragment then being shifted laterally to realign the joint. It is then fixated in the corrected position with surgical screws or pins. By utilizing this advanced procedure, patients are able to commence weight-bearing activities (i.e. walk) immediately after surgery as weight actually compressed the bone together thus assisting in the healing process. Our patients can generally return to moderate activity sooner, usually within 2-4 days following surgery.

Procedures performed today are also much more aesthetically pleasing than in the past because Podiatric surgery is usually elective and patients' expectations are that they will have improvement in not only the function of their foot, but also in it's appearance. Most Podiatric Surgeons implement a type of skin closure that resembles skin closure performed by plastic surgeons. A "plastic" type skin closure does not leave any large "railroad tracks" and can usually be applied in most patients with healthy skin.

#### Hammertoe Correction



Hammertoes are caused by contractions of the digital joints in the foot when the foot either pronates or supinates more than normal. A procedure may often be required when a patient experiences symptoms associated with the deformity. When a joint becomes semi-rigid or rigid due to the contraction, then an arthoplasty is

usually required. This type of procedure involves removing a portion of the proximal phalanx to give more room for the toe to extend. Sometimes a release of the joint capsule must also be performed at the metatarsal-phalangeal joint level. If necessary, extensor or flexor tendons are either lengthened or released. Another procedure commonly done in digits is an arthrodesis, which fuses the joint. This is more common in the second digit where the hallux may have pushed the smaller second toe into its deformed position. Artificial joint replacement can also be implemented when correcting toe deformities.

## Other Common Surgeries

Other common surgeries Foot Institute Doctors perform on a regular occurrence are neuromas, plantar fascial releases, exostosis removal, etc. These procedures will be discussed in detail in later editions of the Physicians Foot Update.

## **Post Surgery**

Following surgery, patients are seen in the surgeon's office. Bandages are changed and the needs of the patient are addressed. Patients are prescribed antibiotics if necessary. Oftentimes, patients are fitted for prescription functional orthotics to help correct foot function and prevent deformities from returning, as a majority of foot surgeries would not be necessary if a patients biomechanical faults were addressed early enough.

Family Physicians suspecting a patient may be suffering from a biomechanical fault such as pronation/supination, or are experiencing any type of foot problem, are invited to refer their patients to the Foot Institute where a biomechanical evaluation and a through examination will be conducted.





Dr. Jason Lehr, DPM

## Ask Your Podiatrist:

How long will I be off my feet following foot surgery?

Advancement in lower extremity surgical procedures has improved greatly in the last 15 years. Most procedures including bunionectomies with osteotomies are performed in a way that allows immediate partial weight bearing following the procedure. Most procedures are usually done one extremity at a time so that a patient may bear the majority of their weight on the non-operative side during the recovery period. Usually, moderate activity can be resumed within 2-4 days following surgery. A post-op shoe is worn for approximately four weeks until the patient can graduate to a closed shoe.

# Northern Alberta Clinic Directory



Dr. Scott Hollingsworth, DPM

## EDMONTON

U of A Hospital Metabolic Centre

The Allin Clinic 10155 - 120 St.

Clareview Medicentre 3504 - 137 Ave. 1780 475-7070

Weinlos Clinic 15508 - 87Ave.

**Torwilliger Medicentre** 600 Riverbend Sq. 1780) 434-7234

Calgary Trail Medicentre #1, 10407 - 51 Ave. 1780) 436-8071

Links Clinic 11910 - 111 Ave.

Millwoods Family Clinic 5706 - 19 A Ave.

**Palisaries Medical Clinic** 12848 - 137 Ave.

#### BONNYVILLE/COLD LAKE

Bonnyville Health Centre 5001 Lakeshore Drive (780) 826-3311

#### DRAYTON VALLEY

**Towers Medical Clinic** 5207 - 50 St. 1(780) 542-5305

#### **EDSON**

**Edson Medical Centre** 616 - 50 St. 1780) 723-5531

#### FT. MCMURRAY

Thickwood Heights Clinic 108 Wolverine Dr. 7780) 791-4547

#### FT. SASKATCHEWAN

Fort Saskatchewan Medical Clinic 9421 - 94 Ave \*(780) 998-2231

#### **GRANDE PRAIRIE**

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

#### LEDUC

Medical Arts Clinic 4721 - 47 Ave.

#### LLOYDMINSTER

**Lloydminster Clinic** 5120 - 46 St. 1(780) 875-2221

#### SHERWOOD PARK

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

#### SPRUCE GROVE

Parkland Medical Associates #202, 93 McLeod Ave. \*(780) 962-3868

#### ST. ALBERT

Associate Medical Clinic 25 St. Michael St.

#### WESTLOCK

Associate Medical Clinic 203, 10030 - 106 St. (780) 349-3341

#### WETASKIWIN

Wetaskiwin Lung Clinic 5217-50 St. \*(780) 352-7085

\* Please book appointments directly with clinics.



Dr. David

Gibbs, DPM

In Edmonton and area Call

(3668) to book an appointment near you.

The Foot Institute is independently owned and operated from the above clinics and institutions.

## South / Central Alberta Clinic Directory



Dr Todd Schnoor, DPM



#### CALGARY

**Beddington Medical** #302, 8120 Beddington

Blvd. N.W.

Brentwood Family **Medical Centre** 510, 3630 Brentwood Rd.N.W.

Forest Lane Medicentre 21A, 3012 - 17th Ave. S.E.

Heritage Family Medical BLK E 8330 Macleod Tr. S.E.

#### Kingsland Medical Clinic 7712- Elbow Dr. S.W.

Richmond Road Family Medical Centre

S.W.

Blvd. S.E.

McKenzie Lake Medical 16642 McKerzie Lake

290, 5255 Richmond Rd.

# **AIRDRIE**

Airdrie Medical Clinic #10-620 First Ave. West (403) 948-3109

#### CANMORE

**Bow River Associate** Medical Clinic

# 202, 1205 Bow Valley Trail (403) 609-2136

#### LACOMBE

Main Street Medical Clinic 4929 - 50th Ave. \*(403) 782-6717

#### STRATHMORE

Strathmore Clinic

#4, 55 Wheatland Trail 14031934 - 5911

#### SYLVAN LAKE

Sylvan Family Health Centre 4936 - 50th Ave. \*(403) 887-2224

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