

footprints

An informational newsletter for patients of APMA member podiatrists

Spring 2013

Running Shoes: Basic Guidelines

People run for many different reasons. For some, it gives them a positive energy boost, and it's an ideal way to keep their weight in check. For others, it's the buzz of competition, or quite simply, because they enjoy it.

One of the first steps to healthy running is wearing supportive running shoes. Neglecting to wear proper footwear can lead to a variety of foot problems that can cause injury and impede performance.

To find the best running shoe, you must first determine your foot type. Are you a pronator or a supinator, or do you have neutral feet? Pronators have relatively flat feet, leading to overpronation (gait in which the ankle rolls inward excessively). Supinators have high arches, leading to underpronation (gait in which too much weight is placed on the outside of the feet). And finally, if you have neutral feet, you have a foot that is in-between a flat-foot and high arch.

For assistance in determining your foot type, consult a podiatric physician. Your podiatrist will perform a gait analysis and provide suggestions about the best running shoe for your foot type. Taking the "wet test" is another way to determine your foot type. To take this simple test, wet the bottom of each of foot and stand normally on a paper bag. After a minute, step off and observe the imprint left by your foot.



High Arch



Neutral Arch



Flat/Low Arch

Follow these basic guidelines for successful running shoe shopping:

- ✓ Have your feet measured while you're standing
- ✓ Always try on both shoes and test your running shoes while still in the store
- ✓ Shop for shoes later in the day; feet tend to swell during the day
- ✓ Buy shoes that don't pinch your toes, either at the tips, or across the toe box
- ✓ Wear or buy the socks you'll wear when you run
- ✓ If you wear orthotics, bring them. You need to see how the shoe fits with the orthotic inside.
- ✓ People who are pronators (low/flat arch) should choose a supportive shoe designed for stability and motion control. These shoes help to correct for overpronation.
- ✓ People who have a neutral arch should choose a shoe with equal amounts of stability and cushioning to help absorb shock

- ✓ People who are supinators (high arch) should choose a cushioned running shoe with a softer midsole and more flexibility. These features will compensate for the poor shock absorption of a high-arched foot.



If you suffer from bunions, finding the right running shoe may be a little tricky, but it can be done. Look for shoes that provide soft mesh at the sides for more comfort and cushioning, a wide toe box, and a snug heel for stability.

Looking for a pair of running shoes that fit your feet? View a complete list of shoes and products with APMA's Seal of Acceptance. Go to APMA.org and click on *Learn About Feet*.

References

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"Most brands of running shoes have many different components related to structure and performance to accommodate various foot types and running styles,"

said APMA member and podiatric physician Stephen Palmer, DPM.

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Arthritis and Pain Management

“Some of my patients use non-medicated treatment options such as warm water with Epsom salts and topical pain medications (e.g., Ben-Gay) for osteoarthritis,”

said APMA member and podiatric physician Jeffrey Bowman, DPM.

If you have been diagnosed with arthritis, or joint inflammation, you know all too well the pain associated with the disease.

There are several types of arthritis, but the most common form is osteoarthritis, or “wear-

and-tear” arthritis. Also referred to as degenerative joint disease, it’s the breakdown of cartilage that cushions the ends of the bones where they meet to form joints. This breakdown causes the bones to rub against each other, causing pain, stiffness, and loss of movement in the joint.

In the foot, osteoarthritis can affect any joint. Symptoms associated with osteoarthritis are tenderness or pain, stiffness in the joint, swelling in the joint, and reduced ability to move, walk, or bear weight. Proper diagnosis, early treatment, and pain management are all key factors in preventing joint deformity and disability.

Treatment entails taking medications for arthritis management. These medications include analgesics and NSAIDs (non-steroidal anti-inflammatory drugs) to provide pain relief and reduce inflammation. Analgesic medications are commonly sold over the counter as Tylenol or acetaminophen. Acetaminophen is most effective for mild to moderate pain. NSAIDs have anti-inflammatory, painkilling, and fever-reducing properties. Some common NSAIDs include aspirin, ibuprofen (e.g., Motrin and Advil), naproxen, and prescription medications such as Celebrex.

Experts are divided over the role of acetaminophen versus NSAIDs. Both are commonly prescribed for osteoarthritis and both are equally effective for pain relief. Factors to consider when choosing either analgesics or NSAIDs include cost, risks, and personal preference.

Other treatment options include steroid medications, pads or arch supports, inserts that support the ankle and foot, physical therapy, custom orthotics, and surgery.

Here are a few foot care tips to consider for arthritis management:

- ✓ Wear shoes that fit properly and feel comfortable
- ✓ Wear shoes with more cushioning and rubber soles
- ✓ Perform exercises to help keep your feet pain-free, flexible, and strong:
 - Achilles stretch—With your palms flat on a wall, lean against the wall and place one foot forward and one foot back. Lean forward, leaving your heels on the floor. Repeat 3 times, holding for 10 seconds on each side.
 - Toe pull—Place a thick rubber band around the toes of each foot, and then spread your toes. Hold this position for five seconds and repeat 10 more times.
 - Toe curl— Pick up marbles or any small objects with your toes.

Consult your podiatrist to determine the best course of treatment for foot and ankle osteoarthritis. To find a podiatric physician in your area, go to APMA.org and click on *Find a Podiatrist*.

References

- ¹ WebMD. “Foot and Ankle Osteoarthritis.” May 10, 2012; accessed February 6, 2013. www.webmd.com/osteoarthritis/guide/foot-ankle-osteoarthritis/print.
- ² WebMD. “NSAIDs (Non-steroidal Anti-Inflammatory Drugs) and Arthritis.” January 19, 2012; accessed February 7, 2013. www.webmd.com/osteoarthritis/guide/anti-inflammatory-drugs.
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Ouch! Shin Splints...Too Much, Too Soon

If you are an avid walker, have begun a new exercise program, or are an experienced runner, you may have experienced one of the most common lower extremity ailments, shin splints. Shin splints are characterized as pain at the front inside area of the shin bone due to overexertion of the muscles. Shin splints usually involve small tears in the leg muscles where they are attached to the shin bone.

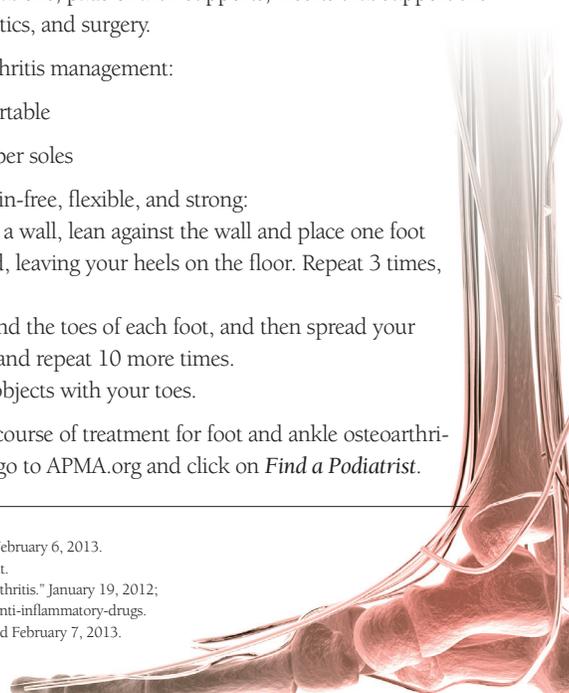
The most common cause of shin splints is inflammation of the periosteum of the tibia (sheath surrounding the bones). Some other common causes include flat feet (overpronation), a high arch (underpronation), inadequate footwear, running on hard surfaces, and increasing training too quickly.

Use the following tips to treat and prevent shin splints:

- ✓ For immediate pain relief:
 - ice the area to reduce pain and inflammation;
 - take an over-the-counter anti-inflammatory (e.g., ibuprofen); and
- ✓ rest to allow the injury to heal.
- ✓ Stretch and strengthen the leg muscles
- ✓ Wear insoles or orthotics that offer arch support
- ✓ Make sure you have the right running shoe for your foot type and for the activity
- ✓ Avoid running on hard surfaces
- ✓ Shorten your stride
- ✓ Consult a podiatrist if your pain is really bad. You should get a full diagnosis to find out if there is a stress fracture in the area.

References

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- ² Sports Injury Clinic. “Shin Splints.” Accessed February 6, 2013. www.sportsinjuryclinic.net/sport-injuries/ankle-achilles-shin-pain/shin-splints.



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.